Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : INCORP SERVICES INC

Account Number : 120120000007 Phone : (702)866-2500

Fax Number : (702)866-2689

Enter the email address for this business entity to be used for futura annual report mailings. Enter only one email address please. \triangleright

documents@incorp.com Email Address:_

> REGISTERED AGENT CHANGE RENCO ELECTRONICS, INC.

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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: RENCO ELECTRONICS, INC.
Name of Corporation
DOCUMENT NUMBER: P10000077979
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Janice Null
Name of Contact Person
InCorp Services, Inc.
Firm/Company
3773 Howard Hughes Parkway Suite 500S
Address
Las Vegas, NV 89169-6014
City/State and Zip Code
documents@incorp.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Janice Null on behalf of InCorp Services, Inc. at (702) 866-2500
Janice Null on behalf of InCorp Services, Inc. at (702) 866-2500 Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassec
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2ED45 (04/13)

H200002615643

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	provisions of sections 607,0502 ange is submitted for a corporate er to change its registered office	lon organized	under the laws of the	State of Flor	ida
	the corporation: RENCO EL			Since of a north	r.
2. The principal	office address:				
3. The mailing a	nddress (if different):				***
4. Date of incor	poration/qualification: 09/24/	2010	Document number:	P100000779	79
5. The name and	i street address of the current regardment of State: (If resigned, enter	gistored agent			
	REGISTERED AGENT SE	ERVICES C) .		
	2975 BEE RIDGE ROAD	SUITE C3			
	SARASOTA, FL 34239				
6. The name and (if changed):	street address of the new regist	•			2020 × iT
	InCorp Services, Inc.			<u>. </u>	<u>1</u> 1
	17888 67th Court North			· .	
		P.O. Box NOT	eklaryeoor		> ;;;}
	Loxahatchee, FL 33470			<u> </u>	
The street addre	ss of its registered office and the	ne street addre	ss of the business of	fice of its régist	egged agent,
Such change wa authorized by th	s authorized by resolution duly e board, or the corporation has	adopted by it been notified	s board of directors of in writing of the cha	or by an officer inge.	ŝo
Signature Signature	Ly Consta		Stacey Constas	i, Assistant Sc	cretary
I hereby accept to I further agree to of my duties, and document is bein corporation has	he appointment as registered a p comply with the provisions of it I am familiar with and accept a filed merely to reflect a chan been notified in writing of this	igent and agre all statutes re the obligation age in the regi change.	te to act in this capa elative to the proper n of my position as re stered office address	city. and complete p egistered agent , I hereby confi	erformance Or, if this rm that the
dan	ce Jull		July 31,		
Signing on beh	alf of an entity:		Date		
	behalf of InCorp Services, Ir	nc.			
131	se or critica tability				

* * * FILING FEE: \$35.00 * * *