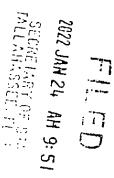
P13000003997

(Re	equestor's Name)			
(Ad	idress)			
(Ac	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
		a sa terr		
J. HORNE				
	FEB - 9	2022		

Office Use Only



700379123457



Amendment Section

COVER LETTER

TO:

Division of Corporations	
SUBJECT: TRXADE INC Name of Corporation	
DOCUMENT NUMBER: P13000003997	
The enclosed Statement of Change of Registered Office/Ag	gent and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
PRASHANT PATEL	
Name of Contact Person	-
TRXADE INC	
Firm/Company	
P.O. Box 1186	
Address	
Land O Lakes, FL 34639	
City/State and Zip Code	-
financeteam@trxade.com	
E-mail address: (to be used for future annual report no	otification)
For further information concerning this matter, please call:	
SUREN AJJARAPU	t (800)805-8705 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Freelight in the Case of the Department of the D	at of Canan

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

Amendment Section
Division of Corporations
The Control of Tallebranes

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

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

statement of cha	inge is submitted for a corporati	617.0502, 607.1508, or 617.1508, Flo on organized under the laws of the Sta	te of Florida	uis
	-	or registered agent, or both, in the Stat	ie oj rioriaa.	
	the corporation: TRXADE INC		 	
2. The principal	office address: 2420 Brunello Tr	ace		
	Lutz, FL 33558			
3. The mailing a	address (if different): P.O. Box 1	186 Land O Lakes, FL 34639		
4. Date of incor	poration/qualification: 08/09/201	Document number: P13	000003997	
	I street address of the current reprintment of State: (If resigned, enter	gistered agent and registered office on ter resigned)	file with the	
	PATEL, PRASHANT			
	3840 Land O Lakes Blvd.			
	LAND O Lakes, FL 34639		SECI SECI	2022,
6. The name and (if changed):	d street address of the new regist	ered agent (if changed) and /or register	red office;	1022 JAN 24
	PATEL, PRASHANT			
	2420 Brunello Trace			Э
		P.O. Box NOT acceptable		
	Lutz, FL 33558			
		he street address of the business offic		
Such change w authorized by t	as authorized by resolution dul he board, or the corporation ha	y adopted by its board of directors or s been notified in writing of the chang	by an officer so ge.)
kin		Suren Ajjarapu	CEO	
	the appointment as registered to comply with the provisions of a familiar with and accepting filed merely to reflect a chast been notified in writing of this speed by:	Printed or typed name agent and agree to act in this capacity of all statutes relative to the proper at the obligation of my position as reginge in the registered office address. It is change.	6 .	formance Or, if this 1 that the
	4-	1/11/2022		
50Fg[[flatine of Registered Agent	Date		
If signing on bo	ehalf of an entity:			
Prasha	nt Patel			
	yped or Printed Name	_		

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