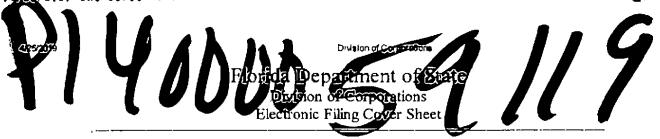
**2**001/003



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000136338 3)))



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To;

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: INCORP SERVICES INC

Account Number : 120120000007

Fax Number

: (702)866-2500 : (702)866-2689

\*\*Enter the email address for this business entity to be used for future " annual report mailings. Enter only one email address please.\*\*

Email Address:

documents@incorp.com

## REGISTERED AGENT CHANGE ALPHA MODUS, CORP.

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#### H1900013633B3

### **COVER LETTER**

TO:	Amendment Section Division of Corporations					
SUBJE	CT: Alpha Modus, Corp.					
	Name of Corporation					
DOCU	MENT NUMBER: P14000059119					
The end	closed Statement of Change of Registered Office/Agent and fee are submitted for fi	ling.				
Please r	return all correspondence concerning this matter to the following:					
Jennifer Sharp Name of Contact Person						
	InCorp Services, Inc. Firm/Company					
	3773 Howard Hughes Pkwy Sulte 500S Address					
	Las Vegas, NV 89169-6014  City/State and Zip Code					
	E-mail address: (to be used for future annual report notification)					
For furt	her information concerning this matter, please call:					
Jer	Name of Contact Person  Name of Contact Person  Area Code & Daytime Telepl	0 7-7 none Number				
Enclose	ed 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E045 (03/12)

### H190001363383

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

	provisions of sections 607.05 inge is submitted for a corpor					
	r to change its registered offi		agent, or both, in the State o	of Florida.		
1. The name of	the corporation: Alpha Modu	ıs, Согр.				
2. The principal	office address: 20311 Chart	twell Center D	rive #1469			
	Cornelius, N					
3. The mailing a	ddress (if different):		<del> </del>			_
4. Date of incorp	poration/qualification: 0	7/11/2014	_ Document number:	P140000591	19	
5. The name and	I street address of the current tment of State: (If resigned, e	registered agent	t and registered office on file	with the		
	RUSSE	LL C. WEIGE	L, III, P.A.			
	201 Alhambra Ci	ircle · Suntrus	t Plaza Suite 1050	SECR	2019 APR	2007.3
	Сога	d Gables, FL	33134	— 岩岩 — 岩岩	PR 2	Casa Casa
6. The name and (if changed):	street address of the new reg	istered agent (it	changed) and /or registered	0 S	5 AM IO:	
	In	Corp Services,	lnc.	 프로	ë	(°
	1788	38 67th Court	North		0	
		P.O. Box NOT accept		<del></del>		
	Loxa	thatchee, FL 3	33470	_		
The street addre	ss of its registered office and be identical.	the street addr	ess of the business office of	its registered ag	gent,	
Such change was authorized by th	s authorized by resolution du e board, or the corporation h	ily adopted by i as been notified	its board of directors or by a d in writing of the change.	ın officer so		
	WXY	W	illiam Alessi, Chief Execut			
Ū	of an officer or director		Printed or typed name and			
I hereby accept I further agree to performance of ugent. Or, if this hereby confirm t	the appointment as registered to comply with the provisions my duties, and I am familiar to document is being filed methat the corporation has been	d agent and agi of all statutes i with and accep rely to reflect a notified in wri	ree to act in this capacity. relative to the proper and co t the obligation of my positi change in the registered off ting of this change.	omplete on as registered fice address, l	•	
(,)		April 19, 2019				
If signing on bet	nalf of an entity:	_	Dieto			
	Jennifer Shar	on behalf of	InCarp Services, Inc.			
Ту	pad or Printed Name	<del></del>	,,			
	671	LINC EEE. C	35.00 + + +			

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)