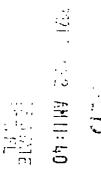
P1500012078

	(Requestor's Name)			
 	(Address)			
	(Address)			
	(City/State/Zip/Phone #)			
☐ B-CK-1	> MAIL MAIL			
	(Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
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CORPORATION SERVICE COMPANY 1201 Havs Street

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I20000000195 REFERENCE : 777477 7539619 AUTHORIZATION : THE BELLE MAN				
COST LIMIT : \$ 35.00				
ORDER DATE : April 22, 2021 ORDER TIME : 1:02 PM				
ORDER NO. : 777477-005				
CUSTOMER NO: 7539619				
CHANGE OF AGENT				
NAME: MICROTALK USA, INC.				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN STAMPED COPY				
CONTACT PERSON: Eyliena Baker EXT# EXAMINER:				

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

statement of ch	ange is submitted for a corpo	502, 617.0502, 607.1508, or 617.1508, Florida Stat ration organized under the laws of the State of Flo fice or registered agent, or both, in the State of Flor	rida
1. The name of	the corporation: Microtalk US	SA, Inc.	
		Ave. Suite 430K-68, Miami, FL, 33131	
3. The mailing	address (if different):		
4. Date of incor	rporation/qualification: 2/3/20	Document number: P15000012	078
	nd street address of the current artment of State: (If resigned, o	registered agent and registered office on file with tenter resigned)	he
	LAW OFFICES OF EDWA	ARD A. MALDONADO, P.A.	
	2850 DOUGLAS ROAD, S	SUITE 303	
	CORAL GABLES, FL 3313	34	
6. The name an (if changed):	•	gistered agent (if changed) and /or registered office	<u></u>
	Corporation Service Comp	pany	
	1201 Hays Street		
		P.O. Box NOT acceptable	第二三
	Tallahassee	FL 32301	MII:10
The street addr	ress of its registered office an Il be identical.	nd the street address of the business office of its re	egistered agent,
Such change wauthorized by t	ras authorized by resolution c the board, or the corporation	duly adopted by its board of directors or by an offi has been notified in writing of the change.	icer so
/s/ Paul Havel Signature of an officer or director		Paul Havel, Director	
		Printed or typed name and title	
I further agree of my duties, a document is be corporation ha	t the appointment as register to comply with the provision nd I am familiar with and acc ing filed merely to reflect a c is been notified in writing of a on Service Company	red agent and agree to act in this capacity, as of all statutes relative to the proper and comple cept the obligation of my position as registered as change in the registered office address, I hereby cathis change.	te performance zent. Or, if this onfirm that the
By: Jurida &		04/22/2021	
.11	billion of the Agent	Date	
If signing on b	ehalf of an entity:		
	Typed or Printed Name		
	* * *]	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 (04/13)