## P16000068555

(Requestor's Name)			
(Address)			
,			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(D)			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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Ra Change

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115 N CALHOUN ST., STE. 4 TALLAHASSEE. FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date: 09	/03/2020	
	rcel Ogbonna-Amu	
Reference #:	1260152	
Entity Name:	INDIAN WHALERS P	LAYERS CORP.
☐ Articles o	f Incorporation/Authorization to Tran	nsact Business
✓ Change of		ANY ISSUES, CALL ANY ISSUES, CALL
Reinstate	ment	(518) 213 - 0826
Conversion	on	Thank you!
☐ Merger		
☐ Dissolutio	n/Withdrawal	
☐ Fictitious	Name	
Other		
Authorized Amo	unt: <b>\$35.00</b>	
Signature:	Marcel og homer time	

F: 800.944.6607

F: +852.2682.9790

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508 statement of change is submitted for a corporation organized under in order to change its registered office or registered agent,	the laws of the State of Florida
1. The name of the corporation: INDIAN WHALI	ERS PLAYERS CORP.
No Change	
3. The mailing address (if different):	
4. Date of incorporation/qualification: August 18, 2016 Docu	ment number: P1600068555
5. The name and street address of the current registered agent and re Florida Department of State: (If resigned, enter resigned)	gistered office on file with the
NRAI Services, Inc	<b>&gt;.</b>
1200 South Pine Island	Road
Plantation, FL 333	24
6. The name and street address of the new registered agent (if change (if changed):	Service Servic
COGENCY GLOBAL INC.	
115 North Calhoun St., Suite	4
Tallahassee, FL 32301	
The street address of its registered office and the street address of as changed will be identical.	the business office of its registered agent,
Such change was authorized by resolution duly adopted by its boar authorized by the board, or the corporation has been notified in wr	d of directors or by an officer so iting of the change.
/s/ Natalia Ostensen Natal	ia Ostensen Secretary
I hereby accept the appointment as registered agent and agree to a further agree to comply with the provisions of all statutes relative performance of my duties, and I am familiar with and accept the or agent. Or, if this document is being filed merely to reflect a chang hereby confirm that the corporation has been notified in writing of	e to the proper and complete
	/3/2020
Signature of Registered Agent	Date

If signing on behalf of an entity:

## Tim Mayville, Assistant Secretary Typed or Printed Name

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