P16000078523

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _______ Certificates of Status _______

Special Instructions to Filing Officer:

Office Use Only

500326163985

19 MAR 15 PM 4:51

2019 MAR 15 AM 9:45

FILED

RA|RO|CHS

MAR 1 8 2019

I ALBRITTON

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

ACCOUNT NO. : I20000000195

REFERENCE : 686667 7974476

AUTHORIZATION :

COST LIMIT : $ 35.00

ORDER DATE : March 15, 2019

ORDER TIME : 4:22 PM

ORDER NO. : 686667-005

CUSTOMER NO: 7974476

CHANGE OF AGENT

NAME: HYPER NETWORKS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_______ CERTIFIED COPY
XX_____ PLAIN STAMPED COPY

CONTACT PERSON: Emily Croft

EXAMINER'S INITIALS: 1C

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: HYPER NETWORKS, INC.
Name of Corporation

DOCUMENT NUMBER: P16000078523

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:

James S. Bainbridge, Esq.
Name of Contact Person

The Bainbridge Law Firm, LLC
Firm/Company

1250 Germantown Pike, Ste. 203
Address

Plymouth Meeting, PA 19462
City/State and Zip Code

jsb@thebainbridgelawfirm.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James S. Bainbridge, Esq. at (484) 690-4542
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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida ______ *in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: HYPER NETWORKS, INC.
2. The principal office address: 616 E Westinghouse Blvd., Ste 102, Charlotte, NC 28273
3. The mailing address (if different): 616 E Westinghouse Blvd., Ste 102, Charlotte, NC 28273
4. Date of incorporation/qualification: 09/26/2016 Document number: P16000078523
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

   Barba, Peter
   10481 S.E. Banyan Way
   Tequesta FL 33469

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

   Corporation Service Company
   1201 Hays Street
   P.O Box NOT acceptable
   Tallahassee FL 32301

2019 MAR 15 AM 9:45

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Signature of an officer or director

Kali Packs CFO
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company
By: Emily Croft
Signature of Registered Agent

03/15/2019
Date

If signing on behalf of an entity:

Emily Croft
Asst. Vice President
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 (03/12)