

P11000083a18

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

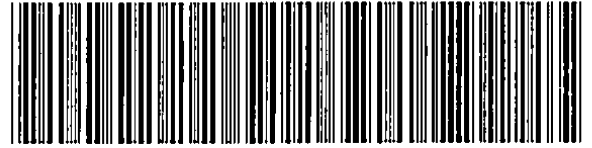
(Business Entity Name)

(Document Number)

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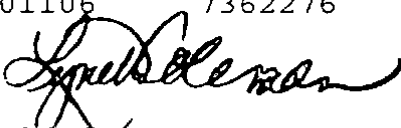
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FILED  
2018 AUG 29 A 11:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11 17 2018

AUG 18 2018

TL

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

ACCOUNT NO. : I20000000195  
REFERENCE : 901106 7362276  
AUTHORIZATION :   
COST LIMIT : \$ 35.00

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ORDER DATE : August 28, 2019

ORDER TIME : 1:28 PM

ORDER NO. : 901106-005

CUSTOMER NO: 7362276

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CHANGE OF AGENT

NAME: BELATRIX SERVICES CORP.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Robinson -- EXT# 62968

EXAMINER: \_\_\_\_\_

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Belatrix Services Corp.  
Name of Corporation

DOCUMENT NUMBER: P17000083218

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:

Michael Vaughn  
Name of Contact Person

Enterprise Counsel Group  
Firm/Company

Three Park Plaza, Suite 1400  
Address

Irvine, CA 92614  
City/State and Zip Code

mvaughn@ecg.law  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Vaughn at ( 949 ) 833-8550  
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

CR2E045 (03/12)



**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: Belatrix Services Corp.  
2. The principal office address: 875 Howard Street, Suite 320  
San Francisco, CA 94103  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 10/16/2017 Document number: P17000083218

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)


W. Bradley Munroe, Esq.  
239 E. Virginia St.  
Tallahassee, FL 32301

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

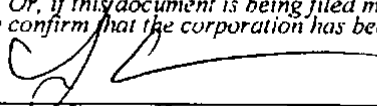
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Nestor Augusto Nocetti Executive Vice President, Corporate Affairs  
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.*

  
Signature of Registered Agent

8-29-17  
Date

If signing on behalf of an entity:

Lydia Cohen

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)



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TALLAHASSEE, FLORIDA