## P17000098774

(Requestor's Name)						
(Address)						
(Address)						
(1.03,035)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
ertified Copies Certificates of Status						
Special Instructions to Filing Officer:						

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

Account#: I20000000088

Date:	12/01/2022	
	Chris Vick	_
	ence #:1807085	_
Entity	Name: APPLIED BUSIN	ESS SOLUTIONS, INC.
	Articles of Incorporation/Authorization	to Transact Business
	Amendment	
V	Change of Agent	
	Reinstatement	
	Conversion	
	Merger	
	Dissolution/Withdrawal	
	Fictitious Name	
	Other	
Autho:	rized Amount: \$35.00	



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

Account#: 120000000088

Date:	12/01/2022				
Name:		_			
	e #:1807085	_			
Entity Na	me: APPLIED BUSIN	ESS SOLUTIONS, INC.			
☐ Am  ☑ Ch ☐ Re	ticles of Incorporation/Authorization nendment nange of Agent einstatement onversion	to Transact Business			
☐ Dissolution/Withdrawal					
☐ Fid	ctitious Name				
☐ Ot	her				
Authorize Signature	ed Amount: \$35.00				

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

statement of cha	ige is submitted for a corporation	17,0502, 607,1508, or 617 1508, Flo r organized under the laws of the Stat registered ogent, or both, m the Stat	<sub>te of </sub> Florida
		IED BUSINESS SOLU	
3. The mailing a	ddress (if different):		
4. Date of incorp	oration/qualification; December	er 15, 2017 Document number:	P17000098774
	street address of the current regis tment of State: (If resigned, enter	stered agent and registered office on tresigned)	file with the
	Jeff	rey Totty	<del></del>
	3020 Hartle	y Road Unit 300	
	Jacksonv	ille, FL 32057	2022 DEC
6. The name and (if changed):	street address of the new register	red agent (if changed) and /or register	red office : 1
	COGENCY GLOBA	AL INC.	
		St., Suite 4	
	Tallahassee, FL 3	30 NOT acceptable	m o
The street addre	ss of its registered office and the be identical.	street address of the business office	of its registered agent,
Such change wa authorized by th	s authorized by resolution duly a e board, or the corporation has b	dopted by its board of directors or been notified in writing of the change	w an officer so E.
		Blake Odom	President
I hereby accept I further agree i performance of agent. Or, if the	o comply with the provisions of a my duties, and I am familiar with	Printed ortyped name tent and agree to act in this capacity il statutes relative to the proper and and accept the obligation of my po- to reflect a change in the registered tified in writing of this change.	: A complete sition as registered
/s/ Timothy Mayville		12/1/2022	
It signing on be	nalf of an entity:	Date	

Timothy Mayville , Assistant Secretary

Typed or Printed Name

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