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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: 120000000088 January 19, 2021 Date:\_ **David Shulman** Name:\_\_ 1317041 Reference #:\_\_ \_\_ CHAMBERS ARCHITECTURE OF FLORIDA, INC. Articles of Incorporation/Authorization to Transact Business Amendment ✓ Change of Agent **ISSUES? CALL** Reinstatement David: 850-270-0082 Conversion Merger ☐ Dissolution/Withdrawal Fictitious Name Other\_\_\_\_\_

Authorized Amount:

\$35.00

Signature:

## 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: Changes Aechitecture of Florida, INC.
2. The principal office address: 3301 BONITA BEACH ROAD SW QUITE 110 BONITA SPRINGS, FL 34134
3. The mailing address (if different): 1800 WASHINGTON BIVD SWIE 111  BATTMORE, MD 21230
4. Date of incorporation/qualification: 11/1 2018 Document number: P18 6000 6 697/
<ol><li>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)</li></ol>
NRAI SERVICES, LUC.
1200 South PINE ISLAND ROAD
PLANTATION, PL 33324
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
COGENCY GLOBAL INC.
115 North Calhoun Street, Suite 4
P.O. Box NOT acceptable
Tallahassee Florida 32301
The street address of its registered office and the street address of the business office of its registered agents 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 of director  BARBALA ANN UST, DIRECTOR OF  Printed or typed name and title  Against 166
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 Date
If signing on behalf of an entity:
andrew Hackett, VP of COGENCY GLOBAL INC.

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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

Typed or Printed Name