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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Relant Automation Inc. Name of Corporation	
DOCUMENT NUMBER: P18000085008	
The enclosed Statement of Change of Registered	Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this i	matter to the following:
Eduardo Vidal	
Name of Contact Person	<del></del>
Relant Automation Inc.	
Firm/Company	
401 East Jackson Street, Suite 2340	
Address	<del></del>
Tampa, FL 33602	
City/State and Zip Code	
evidal@relant-automation.com	
E-mail address: (to be used for future annual	
	,
For further information concerning this matter, pl	ease call:
Eduardo Vidal	, (205 , 657-8160
Name of Contact Person	at (205 )657-8160 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the E	
Mailing Address:	Street Address:
Mailing Address: Amendment Section	Amendment Section
<ul> <li>Division of Corporations</li> </ul>	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

P.O. Box 6327 Tallahassee, FL 32314

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida		
	r to change its registered office or registered agent, or both, in the State of Florida.  Relant Automation Inc.		
2. The principal	the corporation: Relant Automation Inc.  office address: 401 East Jackson Street, Suite 2340, Tampa, F1, 33602		
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 10/09/2018 Document number: P18000085008		
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)		
	Eduardo Vidal	~3	
	3458 Lakeshore Drive	2023 HAY	
	Taliahassee, FL 32312	17 -2	3
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	2 PM 3:	CORPORATION
	URS Agents, LLC	<del></del>	32
	3458 Lakeshore Drive	_	Z
	P.O Box NOT acceptable		
	Tallahassee, F1, 32312		
The street address changed will	ess of its registered office and the street address of the business office of its registered a be identical.	gent,	
Such change was authorized by the Document by:	as authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.		
Eduardo	Controls Manager Printed or typed name and title		
I hereby accept I further agree of my duties, an document is bei	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete perform a manifest with and accept the obligation of my position as registered agent. Or a my filed merely to reflect a change in the registered office address, I hereby confirm that so been notified in writing of this change.	nance if this it the	
URS Agint	nature of Registered Agent Date		
If signing on be	half of an entity:		
Christian Eubank	ss .		
T	yped 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 (04/13)