Note: Pl	lease print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.
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Note: I	DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.
Τυ:	Division of Corporations Fax Number : (850)617-6380
From:	Account Name : INCORP SERVICES INC Account Number : I20120000007 Phone : (702)866-2500 Fax Number : (702)900-2290
	Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. Email Address: documents@incorp.com
	REGISTERED AGENT CHANGE TRANSFORMATION SUPERHIGHWAY INC.
	Certificate of Status0Certified Copy0Page Count03Estimated Charge\$35.00





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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Transformation Superhighway Inc. Name of Corporation

DOCUMENT NUMBER: P18000096612

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.

Jaycie Howard			
Name of Contact Person			
InCorp Services, Inc.	_	~	
Firm/Company	'	2024	
9107 West Russell Road, Suite 100			71
Address		JUN	(12) (12) (12) (12) (12) (12) (12) (12)
Las Vegas, NV 89148-1233			Ŭ
City/State and Zip Code		AH	1 T
documents@incorp.com		4 II :	\bigcirc
E-mail address: (to be used for future annual report notification)		: 26	

For further information concerning this matter, please call:

Jaycie Howard on behalf of InCorp Services, Inc. Name of Contact Person at 800-246-2677 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

6/25/24, 7:17 PM To: +1 850-617-6380 From: +1 702-866-2689 / FL RA Change for Transformation Superhighw Page 3/3 (((H24000219857 3)))

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: Transformation Superhighway Inc.

2. The principal office address: 912 Ronda Sevilla, Unit A

Laguna Woods, CA 92637

3. The mailing address (if different):

6. The

- 11/26/2018 P18000096612 4. Date of incorporation/qualification: ____ Document number:
- 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)

The name and (if changed):	MANDL, PATRICIA S				
	912 Ronda Sevilla, Unit A				
	Laguna Woods, FL 92637	; 🏼			
	street address of the new registered agent (if changed) and /or registered off			<u> </u>	
	InCorp Services, Inc.		26 1	5	
	3458 Lakeshore Drive	- ;	AM II	\bigcirc	
	FO Box NOT acceptable Tallahassee, FL 32312	לייך " ייזי	: 27		

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

Jason Mandl, President

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, Thereby confirm that the corporation has been notified in writing of this change.

Signatuse of Registered Agent

06/24/2024

Date

If signing on behalf of an entity:

Louise Breytenbach on behalf of InCorp Services, Inc.

Typed or Frinted 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)