P19000087590

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





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02/26/21--01027--016 **35.00



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CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Baronie lindsey.baronie@cscglobal.com

Date: February 24, 2021

Order#: 677322/010

Re: STRATIFYD, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX __ File in your office on a routine basis.

XX ___ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Lindsey Baronie c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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

statement of cha	nge is submitted for a corporatio	617.0502, 607.1508, or 617.1508. Florida S m organized under the laws of the State of $\frac{1}{2}$ or registered agent, or both, in the State of F	Florida
1. The name of	the corporation: STRATIFYD INC	C	
2. The principal	office address: 2101 Thrift Road	I. Charlotte, NC 28208	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: Novembe	r 14, 2019 Document number: P190000	87590
	d street address of the current regirtment of State: (If resigned, enter	istered agent and registered office on file wit r resigned)	th the
	Wang, Derek S		
	445 Forest Lake Drive		
	Altamonte Springs	FL 32714	DEN FES
6. The name and (if changed):	Ç	ered agent (if changed) and /or registered offi	7~
	Corporation Service Company		
	1201 Hays Street	A CO. A. ACON	
	Tallahassee	P.O Box NOT acceptable FL 32301	
as changed will	be identical.	e street address of the business office of its	
Such change wa authorized by the	as authorized by resolution duly ne board, or the corporation has	adopted by its board of directors or by an obeen notified in writing of the change.	officer so
	1 Stry	Shannon Ayers	CFO
Signatu	re of an officer or director	Printed or typed name and titl	le .
I further agree of my duties, an document is bei corporation has	to comply with the provisions of	igent and agree to act in this capacity, all statutes relative to the proper and com the obligation of my position as registered age in the registered office address, I hereb change.	plete performance Lagent. Or, if this y confirm that the
By: Lindrey M. Baronse		02/24/2021	
X1≱	nature of Registered Agent lie, Assistant Vice President	Date	
If signing on be	half of an entity:		
T	yped or Printed Name	_	

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