

P31832

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

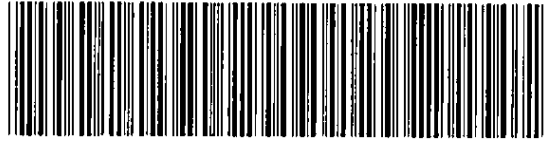
(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
U.S. DEPARTMENT OF THE TREASURY
INTERNAL SECURITY DIVISION



September 13th, 2023

BY USPS

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Statement of Change of Registered Agent
Hamilton Medical, Inc.

Dear Sir/Madam:

Please find the Statement of Change of Registered Agent as well as a check in the amount of \$35.00.

Once filed please return a copy of the filed form by mail to 36 Long Alley Saratoga Springs, NY 12866 or by email to sosfilings@3hcs.com.

Please reach out to us by phone at 518-583-0639 or by email at kevin.kennedy@3hcs.com with any questions.

Best regards,

A handwritten signature in black ink, appearing to read 'Kevin Kennedy', is written over a large, stylized oval shape.

Kevin Kennedy
Corporate Compliance Manager

**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 Nevada
_____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: HAMILTON MEDICAL, INC.
2. The principal office address: 4655 AIRCENTER CIRCLE RENO, NV 89502
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/14/1990 Document number: P31832
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)

CT CORPORATION SYSTEM

1200 SOUTH PINE ISLAND ROAD

PLANTATION, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):

3H Agent Services, Inc.

1415 Panther Lane, Suite 327

P.O. Box NOT acceptable

Naples, FL 34109

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]
Signature of an officer or director

ROBERT HAMILTON - 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, I hereby confirm that the
corporation has been notified in writing of this change.*

[Signature]
Signature of Registered Agent

9/13/03
Date

If signing on behalf of an entity:

Elizabeth Harker President of 3H Agent Services, Inc
Typed 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)