## 9668

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

Office Use Only



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2021 GCT 20 PH 1: 14

2021 OCT 20 AM II: LI

RA/RC/C/18

OCT 2 1 2021 ALBRITTON CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 099647 8357905

AUTHORIZATION :

COST LIMIT : \$ 35/.00

ORDER DATE: October 12, 2021

ORDER TIME : 10:19 AM

ORDER NO. : 099647-006

CUSTOMER NO: 8357905

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## CHANGE OF AGENT

NAME: SURDEX CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS:

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

statement of cha	unge is su	bmitted for a corpo	602, 617.0502, 607.1508, or 617.1508, Florida Statute. ration organized under the laws of the State of <u>Misso</u> ice or registered agent, or both, in the State of Florida	ouri
1. The name of	the corpo	ration: SURDEX CO	DRPORATION	
2. The principal	office ad	dress: 520 Spirit of	St. Louis Boulevard, Chesterfield, MO 63005	
3. The mailing a	nddress (i	f different):		
4. Date of incorp	poration/o	qualification: 07/16	/1992 Document number: P39668	
		ldress of the current State: (If resigned,	registered agent and registered office on file with the enter resigned)	
	Cogen	cy Global Inc.		100
	115 No	rth Calhoun Street,	Suite 4	2021 OCT 20 PH
	Tallaha	issee	FL 32301	20
6. The name and (if changed):		·	gistered agent (if changed) and /or registered office	PH 1:
	Corpora	ation Service Comp	any	~
	1201 H	ays Street	DO D. MOT	
	Tallaha	ssee	P.O. Box. NOT acceptable  FL 32301	
The street addre as changed will	ess of its be identi	registered office an	d the street address of the business office of its regis	tered agent.
Such change was authorized by th	as authorine board,	or the corporation	duly adopted by its board of directors or by an office has been notified in writing of the change.	r so
	رع يا	agne	Jill Cilmi, Vice President	
I hereby accept I further agree of of my duties, an document is bei corporation has	the appo to comply d I am fa ng filed r s been no	cet of director  intiment as register  y with the provision  miliar with and acc  merely to reflect a c  tified in writing of  ce Company	Printed or typed name and title  ed agent and agree to act in this capacity,  is of all statutes relative to the proper and complete p  cept the obligation of my position as registered agen  change in the registered office address, I hereby conjustion that the complete is the conjustion of the complete in the registered of the conjustion and the complete in the conjustion of the conjugation	verformance t. Or if thi, firm that the
By: (	A P	1 Lei	10/20/2021	
	nature of Re	gistered Agent	Date	
If signing on be	half of a	n entity:		
Ami M. Casper,	Asst. Vio		<del></del>	

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