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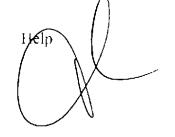
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REGISTERED AGENT CHANGE SOUTHEASTERN ARCHAEOLOGICAL RESEARCH, INC.

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To.

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

statement of ch	provisions of sections 607.0502, 617.0502, ange is submitted for a corporation organize or to change its registered office or registere	ed under the laws of the State of <u>F</u>	Florida	this		
L. The name of	the corporation; Southeastern Archaeologica	Research, Inc.				
	office address: 3117 EDGEWATER DR					
	ORLANDO, FL 32804-3721					
3. The mailing	address (if different):		-			
4. Date of incor	poration/qualification: 10/11/1993	Document number: P9300007	2718			
5. The name an	d street address of the current registered age (tment of State: (If resigned, enter resigned)					
	Anne V Stokes					
2629 Ardsley Di						
	Orlando, FL 32804			7024 JUN		
6. The name and street address of the new registered agent (if changed) and /or registered offic (if changed);				∞ Γ		
	C T Corporation System		92	AH S		
	1200 South Pine Island Road					
	P.O. Box No Plantation, Florida 33324	OT acceptable	ירי	8: 49		
The street address changed will	ess of its registered office and the street add be identical.	dress of the business office of its	registere	ed agent,		
	is authorized by resolution duly adopted by the board, or the corporation has been notifi					
		ANNE STOKES, CEO				
	e of an officer or director	Printed or typed name and title	:			
of my duties, an document is bein corporation has	the appointment as registered agent and a ocomply with the provisions of all standed I am familiar with and accept the obligating filed merely to reflect a change in the rebeen notified in writing of this change.	gree to act in this capacity. Srelative to the proper and comp tion of my position as registered gistered office address, I hereby	olete perf agent. (Canfirm	formance Or, if this what the		
C T Corporation	A start of the sta	6/15/2024				
Sigi	rature of Registered Agent	Date				
lf signing on bel	half of an entity:					
SEAN L. EMERI	CK, ASSISTANT SECRETARY					
Ty	ped or Printed Name					
	* * * FILING FEE:	\$35.00 * * *				

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