P9800070630

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COVER LETTER

TO: Amendment Section **Division of Corporations**

Lasas Technologies, Inc.

Name of Corporation

P98000070630

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:

Stephanie Scott-Gueye

Name of Contact Person

Lasas Technologies

Firm/Company

6120 Powers Ferry Road NW, Suite 200

Address

Atlanta, GA 30339

City/State and Zip Code

compliance@inds.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephanie Scott-Gueye

678 ,894-3500 x1669

Name of Contact Person

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, EL 32314

Street Address:

Amendment Section **Division of Corporations**

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

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

statement of change is submitted for a		207.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this corporation organized under the laws of the State of Florida
		ed office or registe <mark>red agent, or b</mark> oth, in the State of Florida.
1. The name of t	he corporation: Las	s Technologies, INC.
2. The principal office address: 4495		Military Trail, Suite 207, Jupiter, FL 33458
3. The mailing address (if different): 6		120 Powers Ferry Road NW, Suite 200, Atlanta, GA 30339
4. Date of incorp	oration/qualification;	08/10/1998 Document number: P98000070630
		l urrent registered agent and registered office on file with the
	Blank & Meena	n, P.A.
	204 South Mon	· · · · · · · · · · · · · · · · · · ·
	Tallahassee, Fl	, 32301
6. The name and street address of the n (if changed):		m T T T T T T T T T T T T T T T T T T T
	Meenan Law Fi	rm 5.7 5
	300 South Duva	Street, Suite 410
		P.O. Hox NOT acceptable
	Tallahassee, FL	32301
The street addre as changed will	ss of its registered off be identical.	 ice and the street address of the business office of its registered agent.
Such change wa authorized by th	s authorized by resolute board, or the corpora	ition duly adopted by its board of directors or by an officer so ition has been notified in writing of the change.
Duan	ne Malley	Breanne Morley, President
	re of an officer or director	Printed or typed name and title
I hereby accept the appointment de 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.		
10		9.08.17
·	nature of Registered Agent	Date
	half of an entity:	
Timothy	G. Schrenwal	Herr
Ту		
		* * FILING FEE: \$35.00 * * *
MA	MAKE CHECKS AIL TO: DIVISION OF C	fayable to Florida Department of State orporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (03/12)