F130000031214

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(Address)					
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C Kinsey



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Account#: I20000000088

Date:	10/29/2019						
	Jennifer Bialowas						
Reference #	1136512						
	e:	COINX, INC.					
Articl	es of Incorporation/Authori	zation to Transact Business					
Amer Amer	ndment						
Change of Agent							
Reinstatement							
Conversion							
Merger Merger							
Disso	plution/Withdrawal						
☐ Fictiti	ous Name						
Other	r						
Authorized A	Amount: 35.00						
Signature: _	Juf (

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COGENCY GLOBALING. 10 E 40" ST, 10" FL NY, 14Y 10016 D: +1.212,947,7700 P: 800.221.0102 F: 800.944.6607

>

F: +852.2682.9790

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

•			607,1508, or 617,1508, Flo ed under the laws of the Sto	
in order t	o change its registered	l office or registere	d agent, or both, in the Sta	ite of Florida.
1. The name of the corporation:				
			<u>, Suite 200, Lehi, U</u>	T 84043
3. The mailing add	ress (if different):	- 		
4. Date of incorpor	ation/qualification:	7/22/2013	Document number:	F13000003124
	reet address of the cur ent of State: (If resign		nt and registered office on	2019 OCT 29 C. F
_	CORPORATE	CREATION	S NETWORK IN	C. 3007
	11380 PROSE	PERITY FAR	MS ROAD, #221	E 29
_	PALM BEA	CH GARDE	NS, FL 33410	AM 9: 10
6. The name and st (if changed):	reet address of the nev	w registered agent (if changed) and /or registe	red office
_(COGENCY G	SLOBAL IN	O	
_	115 North Ca			
-	Гallahassee,	FL 32301	eptable	
The street address as changed will be	of its registered offic identical.	e and the street add	dress of the business office	e of its registered agent.
Such change was authorized by the	nuthorized by resolutionard, or the corporat	on duly adopted by ion has been notifi	tits board of directors or led in writing of the chang	by an officer so e.
/s/ Christopl	ner Scanlon		Christopher Scanlon	President
I further agrée to e performance of my agent. Or, if this c	comply with the provi duties, and I am fam	sions of all statute: uliar with and acce ad merely to reflect	gree to act in this capacit s relative to the proper an opt the obligation of my pa a change in the registered riting of this change.	id complete osition as revistered
Nignuti	re of Registered Agent		10/29/2019	
If signing on behal			Dist	

Tim Mayville, Assistant Secretary Typed or Printed Name

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