

File 00000 4324

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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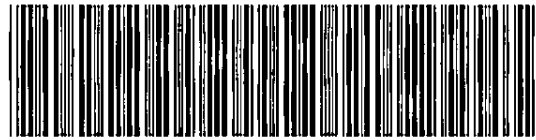
(Business Entity Name)

(Document Number)

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C. GOLDEN  
JUL 20 2019

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** TAK Communications, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** F16000004324

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:

Rachel Hanisch

Name of Contact Person

Quaintance Law Office P.C.

Firm/Company

P.O. Box 2208

Address

Sioux Falls, SD 57101-2208

City/State and Zip Code

rh@qlopc.com; as@qlopc.com

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

For further information concerning this matter, please call:

Rachel Hanisch

Name of Contact Person

at ( 605 ) 339-1000

Area Code & Daytime Telephone Number

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, FL 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**

*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 South Dakota \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.*

- 1. The name of the corporation: TAK Communications, Inc.
- 2. The principal office address: 4401 S Technology Drive, Suite 3, Sioux Falls, SD 57106
- 3. The mailing address (if different): \_\_\_\_\_
- 4. Date of incorporation/qualification: 09/27/2016 Document number: F16000004324

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)

InCorp Services  
17888 67th Court North  
Loxahatchee, FL 33470

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

Andrew H. Reiss, c/o Chetty Passidomo  
821 Fifth Avenue South  
P.O. Box NOT acceptable  
Naples, Florida 34102

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.

 Micah S. Mauney, President  
Signature of an officer or director 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.*

 6/11/19  
Signature of Registered Agent Date

If signing on behalf of an entity:  
\_\_\_\_\_  
Typed or Printed Name

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