

703355

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

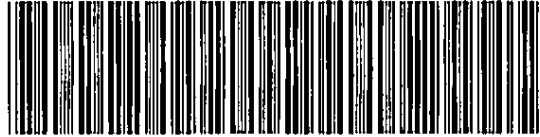
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PIN-GRO-VIL INC
Name of Corporation

DOCUMENT NUMBER: 703355

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:

Len Wilder
Name of Contact Person
Associated Corporate Services, LLC
Firm/Company
6111 Broken Sound Parkway NW
Address
Boca Raton, FL 33487
City/State and Zip Code
lwilder@ssclawfirm.com

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

For further information concerning this matter, please call:

Len Wilder at (561) 237-6844
Name of Contact Person 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: PIN-GRO-VIL INC

2. The principal office address: 8934 Cypress Street, Boynton Beach, FL 33436

3. The mailing address (if different): _____

4. Date of incorporation/qualification: February 1, 1962 Document number: 703355

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)

Kaye Bender Rembaum, P.L.
1200 Park Central Blvd. South
Pompano Beach, FL 33064

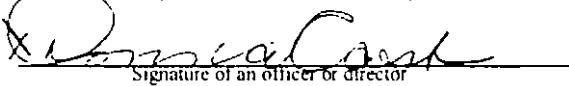
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6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Associated Corporate Services, LLC
6111 Broken Sound Parkway NW, Suite 200
Boca Raton, FL 33487
P.O. Box NOT acceptable

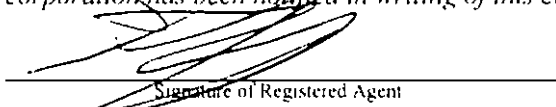
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.


Signature of an officer or director

Donald Cash Treasurer/Vice Pres.
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.


Signature of Registered Agent

July 18, 2022
Date

If signing on behalf of an entity:

Len Wilder
Typed or Printed Name

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