

M 22000018980

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

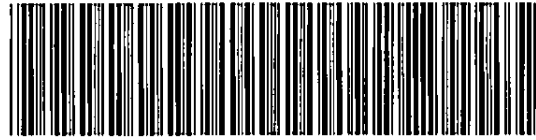
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2023 MAY 17 PM 1:07
SOUTH FLORIDA
PUBLIC SERVICE, FL



2023 MAY 17 PM 12:00
PUBLIC SERVICE, FL

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 745215 8413258
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 25.00'

ORDER DATE : May 11, 2023
ORDER TIME : 10:02 AM
ORDER NO. : 745215-005
CUSTOMER NO: 8413258

CHANGE OF AGENT

NAME: VILLAGE PET CARE LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XXX _____ PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS: _____

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: VILLAGE PET CARE, LLC

2. (a) 1090 CENTER DR Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

(b) 1090 CENTER DR Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

PARK CITY, UT 84098

PARK CITY, UT 84098

12/19/2022

M22000018980

3. 12/19/2022 Date of filing/registration in Florida 4. M22000018980 Document number

5. (a) SPENSERV, INC.
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

201 N FRANKLIN ST STE 2150

TAMPA, FL 33602

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

Corporation Service Company

NEW Registered Office Address:

1201 Hays Street

Tallahassee, FL 32301

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 CLERK OF STATE
 TALLAHASSEE, FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

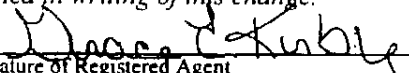
/s/ Jill Cilmi

Jill Cilmi, Authorized Person

Signature of a member or authorized representative of a member

Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.


 Signature of Registered Agent

Grace E. Kirby, Asst. Vice President

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00