

P99000082298

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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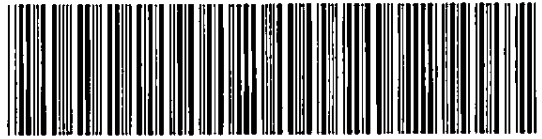
(Business Entity Name)

(Document Number)

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

1. The name of the corporation: ARCHIVE AMERICA OF PALM BEACH, INC.

2. The principal office address: \_\_\_\_\_  
3455 NW 54 STREET MIAMI, FL 33142

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 09/17/1999 Document number: P99000082298

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)

CORPDIRECT AGENTS, INC.  
\_\_\_\_\_  
515 East Park Ave  
\_\_\_\_\_  
Tallahassee FL 32301

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

Corporation Service Company  
\_\_\_\_\_  
1201 Hays Street  
\_\_\_\_\_  
Tallahassee FL 32301  
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.

/S/ Evelyn Macia  
\_\_\_\_\_  
Signature of an officer or director

Evelyn Macia, Secretary  
\_\_\_\_\_  
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.*

Corporation Service Company  
By: Grace E. Kirby  
\_\_\_\_\_  
Signature of Registered Agent

01/30/2024  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

Grace E. Kirby, Asst. Vice President  
\_\_\_\_\_  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (04/13)