F11000001352

(F	Requestor's Name)			
	Address)			
(/	Address)			
(0	City/State/Zip/Phone #)			
PICK-UP	☐ WAIT ☐ MAIL			
3)	Business Entity Name)			
(Document Number)				
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CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

Date: 12/15/2021

	Acc#I20160000072
Name:	ECOFLO, Inc.
Document #:	
Order #:	14021180
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of	
Apostille/Notarial Certification:	Country of Destination: Number of Certs:
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Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$ 43.75 Thank you!

COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJI Name o	ECT: ECOFLO, Inc. of Corporation	
DOCU	JMENT NUMBER: F11000001352	
The en	closed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this	matter to the following:
Name	of Contact Person	
Firm/C	Company	
Addres	ss	
City/St	tate and Zip Code	
E-mai	l address: (to be used for future annual	report notification)
For fu	rther information concerning this matter, p	please call:
	Name of Contact Person	at (at () Area Code & Daytime Telephone Number
Enclos	sed 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

CR2E045 (04/13)

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

statement of chan	provisions of sections 607.0502, 617.0502, nge is submitted for a corporation organize r to change its registered office or registere	rd under the laws of the State of MD	1is
1. The name of th	he corporation: ECOFLO, INC.		
2. The principal of	office address: 2750 Patterson StGreensboro,	NC 27407	
	ddress (if different):		
4. Date of incorpo	oration/qualification: 03/25/2011	Document number: F11000001352	
5. The name and Florida Depart	street address of the current registered age tment of State: (If resigned, enter resigned)	nt and registered office on file with the	
	CORPORATION SERVICE COMPANY		
•	1201 HAYS ST		
	TALLAHASSEE, FL 32301		
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	2021
•	1200 South Pine Island Road		1 -
•	Plantation, Florida 33324	OT acceptable dress of the business office of its registers	ed agent, C
_		T1	
Such change was authorized by the	is authprized by resolution duly adopted b he hoard, or the corporation has been notif	y its board of directors or by an officer so red in writing of the change.	o
	e of an officer or director	Adrienne W. Wilhoit, Vice President Printed or typed name and title	
I hereby accept to I further agree to of my duties, and document is bein corporation has	the appointment as registered agent and a to comply with the provisions of all statute of I am familiar with and accept the obliga ng filed merely to reflect a change in the t been notified in writing of this change.	ngree to act in this capacity. es relative to the proper and complete per ution of my position as registered agent, to egistered office address, I hereby confirm	formance Or if this 1 that the
C T Corporation	ana Baeta	12/14/2021	
	nature of Register d Agent	Date	
If signing on bel	half of an entity:		
Maria Ozae	eta, Vice President		
Ту	yped 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)

By: