182054

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
J. DENNIS 01.24.25				

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Office Use Only

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

1. The name of the corporation: SIERRA LUMBER, INC.

2. The principal office address: 1242 East 5th Avenue Tampa, FL 33605

4. Date of incorporation/qualification: <u>12/10/1954</u> Document number: <u>182054</u>

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)

CORPORATE CREATIONS NETWORK, INC.

	801 US Highway 1					
	North Palm Beach	FL	33408	<u> </u>	2025	
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered offi			office CAL	JAN 24	רוי
	Corporation Service Company			— <u> </u>	AM	\Box
	1201 Hays Street		_		: !	
	P.O. Box NOT acceptable		- 28	44		
	Tallahassee	FL	32301			

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/ Katherine Serevitch,	Katherine Serevitch,	Vice President
Signature of an officer or director	Printed or typed name and ti	ile

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. Thereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company

By: Drace CKuble Signature of Registered Agen 01/15/2025

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)