838126

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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

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ACCOUNT NO. : 12000000195
REFERENCE : 910303 7840575
AUTHORIZATION :
COST LIMIT : \$ 35.00
ORDER DATE : January 21, 2025
ORDER TIME : 10:04 AM
ORDER NO. : 910303-107
CUSTOMER NO: 7840575
CHANGE OF AGENT
NAME: SCHIRMER FIRE PROTECTION ENGINEERING CORPORATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
CONTACT PERSON: Amanda Miller
EXAMINER'S INITIALS:

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

statement of change is submitted for a corporation organized under the laws of the State of DE in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: SCHIRMER FIRE PROTECTION ENGINEERING CORPORATION	
2. The principal office address: 3610 Commerce Dr. Suite 817 Baltimore, MD 21227	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 03/30/1977 Document number: 838126	
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)	
NRAI SERVICES, INC.	2025
NRAI SERVICES, INC. 1200 SOUTH PINE ISLAND ROAD	FEB 1
PLANTATION, FL 33324	8 19 PH
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Corporation Service Company	2025 FEB 19 PM 12: 31
P.O. Box, NOT acceptable	
Tallahassee FL 32301	
The street address of its registered office and the street address of the business office of its registere as changed will be identical.	d agent,
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/ Dina Wong Dina Wong Secreta	ıry
Signature of an officer or director Thereby 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 perf of my duties, and I am familiar with and accept the obligation of my position as registered agent. Concerning the document is being filed merely to reflect a change in the registered office address. I hereby confirm corporation has been notified in writing of this change.	ormance)r, if this that the
Corporation Service Company By: 01/23/2025 Signature of Registered Agent 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)