847536

(Requestor's Name)				
(Address)				
(Address)				
, ,				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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2022 JUL 27 PH 4: 05

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A. BUTLER

JUL 2 8 2022

CORPORATION SERVICE COMPANY

CONTACT PERSON: Eyliena Baker

1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : 12000000195				
REFERENCE : 823010 7160018				
AUTHORIZATION: Spelloceman				
COST LIMIT : \$ 35.00				
ORDER DATE : July 20, 2022				
ORDER TIME : 2:37 PM				
ORDER NO. : 823010-386				
CUSTOMER NO: 7160018				
CHANGE OF AGENT				
NAME: S. M. LAWRENCE COMPANY, INC.				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY				
XX PLAIN STAMPED COPY				

EXAMINER'S INITIALS:

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

statement of cha	nge is submitted for a corporatio	617.0502, 607.1508, or 617.1508, Florida Stong or $\frac{1}{2}$ on organized under the laws of the State of $\frac{1}{2}$ or registered agent, or both, in the State of Fl	Г N
1. The name of t	he corporation: S.M. LAWRENC	E COMPANY, INC.	
	office address: 1330 Murfreesbo		
3. The mailing a	ddress (if different):		
4. Date of incorp	xoration/qualification: 11/20/198	Document number: 847536	
	street address of the current regi tment of State: (If resigned, enter	istered agent and registered office on file wit r resigned)	h the
	C T CORPORATION SYSTEM	М	
	1200 SOUTH PINE ISLAND R	ROAD	
	PLANTATION	FL 33324	20
6. The name and (if changed):	street address of the new registe	ered agent (if changed) and /or registered offi	PILL D 2022 JUL 27 PN 1: 05 SECRETARY OF STATE TALL AHASSEE, FI
	Corporation Service Company	,	1,700 p
	1201 Hays Street		F SI
	Tallahanan	P.O Box NOT acceptable	F 05
	Tallahassee	FL 32301	• •
as changed will	be identical.	adopted by its board of directors or by an obeen notified in writing of the change.	
authorized by th	e board, or the corporation has	Jill Cilmi	Vice President
Signitur	e of an officer or director	Printed or typed name and title	
I further agree to of my duties, and document is being corporation has	o comply with the provisions of	igent and agree to act in this capacity. All statutes relative to the proper and comp the obligation of my position as registered age in the registered office address. I hereby change.	olete performance agent. Or, if this confirm that the
By: Iln	are Cokuble	07/25/2022	
Sign If signing on bel	native of Registered Agent	Date	
Grace E. Kirby, A	Asst. Vice President		
	ped or Printed Name	_	

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