

B13 000000 292

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

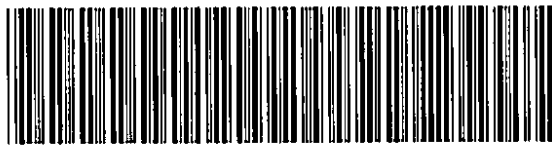
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CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 963066 8290202

AUTHORIZATION :

COST LIMIT : \$ 35.0



ORDER DATE : February 6, 2025

ORDER TIME : 1:48 PM

ORDER NO. : 963066-020

CUSTOMER NO: 8290202

CHANGE OF AGENT

NAME: BELCAN SERVICES GROUP
LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Shauna Godbolt

EXAMINER'S INITIALS: _____

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Belcan Services Group Limited Partnership
Name of Limited Partnership or Limited Liability Limited Partnership
2. 10/18/2013
Date of filing/registration in Florida
3. B13000000292
Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

C T CORPORATION SYSTEM
Name
1200 SOUTH PINE ISLAND ROAD
Address
PLANTATION, FL 33324
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Corporation Service Company
Name
1201 Hays Street
Florida street address (P.O. Box not acceptable)
Tallahassee FL 32301
City, State and Zip

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TALLAHASSEE, FL 32301

6. Such change(s) is/are effective when filed by the Florida Department of State.

DocuSigned by:
Paul Dorger
Signature of General Partner - Paul Dorger, Secretary of General Partner

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 obligations of my position as registered agent.

Signature of Registered Agent

Filing Fee: \$35.00
Certified Copy (optional): \$52.50