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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 145486 AUTHORIZATION : COST LIMIT : \$ 35'.000 ORDER DATE: November 22, 2023 ORDER TIME : 9:59 AM ORDER NO. : 145486-016 CUSTOMER NO: 7812581 CHANGE OF AGENT NAME: EVENT SERVICES, INC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: __ CERTIFIED COPY XX PLAIN STAMPED COPY CONTACT PERSON: Alexxis Weiland-sorenson

EXAMINER'S INITIALS:

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

statement of ch	nange is submitted for a corpor	02. 617.0502, 607.1508. or 617.1508, Florida Statutes, this ration organized under the laws of the State of DE ce or registered agent, or both, in the State of Florida.
1. The name of	f the corporation: EVENT SER	VICES, INC.
	al office address: 1241 E Main	
3. The mailing	address (if different):	
4. Date of inco	rporation/qualification: 05/10	/2000 Document number: F00000002621
5. The name ar		registered agent and registered office on file with the
	C T CORPORATION SYS	TEM
	1200 SOUTH PINE ISLAN	D ROAD 2
	PLANTATION	FL 33324 FC T
6. The name an (if changed):		gistered agent (if changed) and /or registered office
	Corporation Service Comp	· · · · · · · · · · · · · · · · · · ·
	1201 Hays Street	9: 3: 12: 3: 13: 13: 13: 13: 13: 13: 13: 13: 13:
	<u> </u>	P.O. Box NOT acceptable
	Tallahassee	FL 32301
The street addr as changed wil	ress of its registered office and I be identical.	the street address of the business office of its registered agent.
Such change wanthorized by t	as authorized by resolution d he board, or the corporation h	uly adopted by its board of directors or by an officer so las been notified in writing of the change.
	2 agric	Jill Cilmi, Vice President
I hereby accept I further agree of my duties, ar document is be corporation ha	t the appointment as registere to comply with the provisions of I am familiar with and accing filed merely to reflect a closs been notified in writing of the Service Company	d agent and agree to act in this capacity. If of all statutes relative to the proper and complete performance ept the obligation of my position as registered agent. Or, if this tange in the registered office address, I hereby confirm that the his change.
By: Mora Takubia		11/29/2023
- Sīg	gnature of Registered Agent	Date
If signing on be	chalf of an entity:	
Grace E. Kirby,	Asst. Vice President	
T	yped or Printed Name	

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