F000000594/

(Re	questor's Name)				
(Ad	dress)	. ,			
(Ad	dress)				
(Cit	y/State/Zip/Phone	; #)			
PICK-UP	MAIT	MAIL			
(Bu	siness Entity Nam	ne)			
(Document Number)					
Cerufied Copies	_ Certificates	of Status			
Special Instructions to	Filing Officer:				

Office Use Only



000396696350

RECEIVED

A. BUTLER NOV - 3 2022 CORPORATION SERVICE COMPANY

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

ACCOUNT NO. : 12000000195				
REFERENCE : 071737 7428498				
AUTHORIZATION: Truebelland				
COST LIMIT : \$ 35.00				
ORDER DATE : October 24, 2022				
ORDER TIME : 9:37 AM				
ORDER NO. : 071737-189				
CUSTOMER NO: 7428498				

CHANGE OF AGENT				
NAME: PROFESSIONAL DRIVERS OF GEORGIA, INC.				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY				
CONTACT PERSON: Alexxis Weiland				
EXAMINER'S INITIALS:				

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

statement of cha	provisions of sections 607.0502, ange is submitted for a corporation	n organized under the law	s of the State of _	Georgia	his ————	
	r to change its registered office o			ioriaa.		
1. The name of t	he corporation: PROFESSIONA	L DRIVERS OF GEORG	BIA, INC.			-
2. The principal	office address:					_
	11845 Satellit	e Blvd #300, Duluth, (GA 30097			
	ddress (if different):			_		_
4. Date of incorp	oration/qualification: 10/24/200	Document n	umber: <u>M00000</u>	005941		_
	street address of the current regitment of State: (If resigned, enter		f office on file wit		21	
	Corporate Creations Network I	nc		<u> </u>)22 F	r,
	801 US Highway 1 North Palm Beach, FL 33408				2022 NOV - 1	-1 22
				a de la composición dela composición de la composición de la composición dela composición dela composición dela composición de la composición de la composición dela com		-
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office				AM 8: 01	- 2
	Corporation Service Company					
	1201 Hays Street		_			
	P.O. Box NOT acceptable					
	Tallahassee	FL	32301			
	ss of its registered office and the be identical.					
Such change wa authorized by th	s authorized by resolution duly a e board, or the corporation has b	ndopted by its board of di seen notified in writing of	rectors or by an of the change.	officer so)	
~		Gearoid Moore		<u></u>		
Signatur	of an officer or director		or typed name and title			
By: Corporation	the appointment as registered as a comply with the provisions of a lam familiar with and accept to get the first a change been notified in writing of this a pervious Company	gent and agree to act in the statutes relative to the the child statutes relative to the see in the registered office thange.	nis capacity, proper and complion as registered address, I hereby	olete perj agent. (confirm	formance Or if this 1 that the	?
If signing on bel	alf of an entity:					
	Asst. Vice President	-				
- ,	•					

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)

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