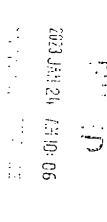
F0200CC03572

(Re	questor's Name)	
(110	questor s riums,	
(Ad	dress)	
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(Ad	cress)	
(Cit	y/State/Zip/Phone #i	
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D DICK UP	□ JA(A)∓	[]
PICK-UP	WAIT	MAIL
	siness Entity Name)	
06)	Silless Entity Patrie)	
(Do	cument Number)	, <u>.</u> .
cd Copies	Certificates o	of Status
		
adial Instructions to Filin	ig Officer:	
		

Office Use Only



200401248912





A. DUVILLE R
JAN 2 5 2023

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

ACCOUNT NO. : 12000000195					
REFERENCE : 3905.08 7308987					
AUTHORIZATION: Squelle real					
COST LIMIT : \$ 35.00					
ORDER DATE : January 23, 2023					
ORDER TIME : 8:45 AM					
ORDER NO. : 390508-005					
CUSTOMER NO: 7308987					
CHANGE OF AGENT					
NAME: AMCAN, 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, 617.0 inge is submitted for a corporation orş er to change its registered office or reg	ganized under the laws of the State o	f_Delaware	_
1. The name of a	the corporation: AMCAN HOLDINGS,	INC.		
	office address: 500 N. MAITLAND AV		751	_
3. The mailing a	iddress (if different): P.O. BOX 94036	8 MAITLAND, FL 32794-0368		
	poration/qualification: 07/11/2002)0003572	<u>. </u>	
	d street address of the current registere rtment of State: (If resigned, enter resigned)		with the	
	GUIDA, FRANK J			
	500 N. MAITLAND AVE., SUITE 21	15		
	MAITLAND	FL 32751	2023	
6. The name and (if changed):	d street address of the new registered a	gent (if changed) and /or registered of	2023 JAN 21	,
	Corporation Service Company		- 1 10;	
	1201 Hays Street		0 0	محمدد
	P.O.	Box NOT acceptable	— r:	
	Tallahassee	FL 32301		
The street addreas changed will	ess of its registered office and the stre be identical.	eet address of the business office of	its registered ag	gent.
Such change wa authorized by th	as authorized by resolution duly adop he board, or the corporation has been	nted by its board of directors or by a notified in writing of the change.	ın officer so	
plan	coys	Nitin Tarsarya	Corporate Se	cretary
Signatu	re of an officer or director	Printed or typed name and	I tale	
I furthér agrée i of my duties, an document is bei corporation has	the appointment as registered agent to comply with the provisions of all s ad I am familiar with and accept the a ing filed merely to reflect a change in s been notified in writing of this chan n Service Company	and agree to act in this capacity, tatutes relative to the proper and co obligation of my position as register the registered office address, I her ge.	omplete perform red agent. Or, ij eby confirm tha	ance f this t the
By: Xrace 2		01/23/2023		
Sig	nature of Registered Agent	Date		
If signing on be	half of an entity:			
Grace E. Kirby,	Asst. Vice President			

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

Make checks payable to Florida Department of State

Typed or Printed Name