603000000391

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17. HUNT CZ/25/24 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 281002 8435053

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : January 23, 2024

ORDER TIME : 8:39 AM

ORDER NO. : 281002-152

CUSTOMER NO: 8435053

CHANGE OF AGENT

NAME: NRT SUNSHINE INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Miller

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 inge is submitted for a corporation o ir to change its registered office or re	rganized under the lav	vs of the State	of DE	this	_
1. The name of t	the corporation: NRT SUNSHINE IN	C.				
	office address: 175 PARK AVENUE		0			_
3. The mailing a	ddress (if different):					
4. Date of incorporation/qualification: 02/26/2003 Document number: F03000000991						
	d street address of the current register tment of State: (If resigned, enter res		d office on file	e with the		
	CORPORATE CREATIONS NET	WORK, INC.				
	801 US HIGHWAY 1					
	NORTH PALM BEACH	FL	33408			
6. The name and (if changed):	I street address of the new registered	agent (if changed) and	d /or registered	d office	39 34.FT9	
	Corporation Service Company				(D)	
	1201 Hays Street			SS	<u> </u>	Í
	PO Box NOT acceptable					
	Tallahassee	FL_	32301	P\	: 2	
The street addre as changed will	ess of its registered office and the st be identical.	reet address of the bu	siness office o	of its registe	red ag	ent.
Such change wa	is authorized by resolution duly add the board, or the corporation has bee	opted by its board of d n notified in writing o	lirectors or by of the change.	an officer:	30	
χ	in 8 Comi	JILL CILMI		VICE	PRES	IDENT
Signatur	of an officer or director		ed or typed name a			
I hereby accept I further agree to of my duties, and document is bein corporation has Corporatior	the appointment as registered agen o comply with the provisions of all d I am familiar with and accept the ng filed merely to reflect a change i been notified in writing of this cha n Service Company	et and agree to act in i statutes relative to the obligation of my post in the registered office inge.	this capacity. e proper and i ition as regist e address, I he	complete pe ered agent. ereby confir	erforme Or, if m that	ance this the
	c. Tokuble	02/27/2024				
_	nature of Registered Agent		Date			
If signing on bel	half of an entity:					
GRACE E. KIRB	Y, ASST. VICE PRESIDENT					
Tv	ped or Printed Name					

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