## F030000042360

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Only/Oldio/Lip/) Notice I//
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
<del></del>
Special Instructions to Filing Officer:
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J. HORNE J.M 13 2025
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Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street

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

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ACCOUNT NO.	: I2000000195				
REFERENCE	: 317041 8366355				
AUTHORIZATION	: Com of war				
COST LIMIT					
ORDER DATE : June 11, 2025					
ORDER TIME : 1:30 PM					
ORDER NO. : 317041-035					
CUSTOMER NO: 8366355					
	·				
CHANGE OF AGENT					
NAME CEATE COLLECTION	YON CERUICE INC				
NAME: STATE COLLECTION SERVICE, INC.					
PLEASE RETURN THE FOLLOWING AS I	PROOF OF FILING				
	PROOF OF FILING:				
CERTIFIED COPY PLAIN STAMPED COPY					
CONTACT PERSON: Shauna Godbolt					

EXAMINER'S INITIALS: \_\_\_\_\_

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH $\nu$ FOR CORPORATIONS

statement of cha	nge is submitted for a corpora	2, 617.0502, 607.1508, or 617.1508, Florida attion organized under the laws of the State of	Illinois	
-		e or registered agent, or both, in the State of I	'lorida.	
1. The name of t	he corporation: STATE COLL	ECTION SERVICE, INC.		
2. The principal	office address: 2509 S. STOU	GHTON RD MADISON, WI 53716-3319		
3. The mailing a	ddress (if different): P.O. BOX	( 6250 MADISON. WI 53716-0250		
	Date of incorporation/qualification: 08/19/2003 Document number: F03000004236			
	I street address of the current retirement of State: (If resigned, er	egistered agent and registered office on file winter resigned)	ith the	
	C T CORPORATION SYST	EM		
	1200 SOUTH PINE ISLAND	ROAD	_	
	PLANTATION	FL 33324		
6. The name and (if changed):	_	stered agent (if changed) and /or registered of	2025 JU.: 12	
	Corporation Service Compa	пу		
	1201 Hays Street		11E.D	
	Tallahassee	P.O. Box NOT acceptable  FL 32301		
The street addre	ess of its registered office and be identical.	the street address of the business office of it	- : 1/2	
Such change wa	is authorized by resolution du board, or the corporation ha	ly adopted by its board of directors or by an as been notified in writing of the change.	officer so	
	1	Douglas Spaete,	Secretary	
Signatur	re of an officer or director	Printed or typed name and ti	tle	
I further agree to of my duties, an document is beil corporation has	the appointment as registered to comply with the provisions of I am familiar with and accessing filed merely to reflect a che been notified in writing of the Service Company	d agent and agree to act in this capacity, of all statutes relative to the proper and conept the obligation of my position as registered ange in the registered office address. I here his change.	aplete performance d agent. Or, if this by confirm that the	
By: Shav	ına Godbolt	Date		
If signing on be	half of an entity:			
SHAUNA GOD	BOLT			
	sped or Printed Name			
	* * * F	LING FEE: \$35.00 * * *		

Make CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13) 317041-35