F03000004693

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2024 MAY -3 PM 1:06
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TALLAHASSEE, FLORIDA

A. RAMSEY
MAY 6 2024

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

ACCOUNT NO. : I20000000195

REFERENCE : 428830 4724254

AUTHORIZATION :

COST LIMIT : $ 35.00

ORDER DATE : April 22, 2024

ORDER TIME : 4:08 PM

ORDER NO. : 428830-048

CUSTOMER NO: 4724254

CHANGE OF AGENT

NAME: WESTFIELD SERVICES, 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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of OH _____ *in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: WESTFIELD SERVICES, INC.

2. The principal office address: ONE PARK CIRCLE Po Box 5001, WESTFIELD CENTER, OH 4425

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 09/22/2003 Document number: F03000004693

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

OHIO FARMERS INSURANCE COMPANY

WOOD RIDGE II Professional Pl, 2403 S.E. 17TH STREET, SUITE 401

OCALA FL 34471

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6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

1201 Hays Street

P.O. Box NOT acceptable

Tallahassee FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

/s/ Jill Cilmi
Signature of an officer or director

Jill Kirby Vice President
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company

By: _____
Signature of Registered Agent

5/1/2024
Date

If signing on behalf of an entity:

Grace E Kirby, Asst Vice President
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314