

CAPITOL SERVICES

001/02/07/16/2024 09:28:04 AM

F04000004010

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : CAPITOL CORPORATE SERVICES, INC.
Account Number : I20160000048
Phone : (800)345-4647
Fax Number : (800)432-3622

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REGISTERED AGENT CHANGE OFFICE MANAGEMENT SYSTEMS, INC.

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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 MISSISSIPPI in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: OFFICE MANAGEMENT SYSTEMS, INC.
2. The principal office address: 327 YORKVILLE ROAD EAST
COLUMBUS, MS 39702
3. The mailing address (if different): C/O Randy McDade 327 Yorkville Road East COLUMBUS, MS 39702
4. Date of incorporation/qualification: 7/8/2004 Document number: F04000004010
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)

C T CORPORATION SYSTEM

1200 SOUTH PINE ISLAND ROAD

PLANTATION, FL 33324

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

Capitol Corporate Services, Inc.


515 East Park Avenue 2nd Fl

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.


C585F8212359437...
Signature of an officer or director

Randy McDade, EVP/CFO

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.



Signature of Registered Agent

7/16/2024

Date

If signing on behalf of an entity:

Brian Radecki, Assistant Secretary on behalf of Capitol Corporate Services, Inc.

Typed or Printed Name

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