F06000000360

	(Requestor's Name)	
	(Address)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	(Business Entity Name)	
	(22,,	
	(Document Number)	
Certified Copies	_ Certificates of Stat	116
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Special Instructions to	Filing Officer:	
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Office Use Only



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

ACCOUNT NO. : I2000000195				
REFERENCE : 567597 8373137				
AUTHORIZATION: Spelle man				
COST LIMIT : \$ 35.00				
ORDER DATE: March 23, 2022				
ORDER TIME : 1:23 PM				
ORDER NO. : 567597-007				
CUSTOMER NO: 8373137				
CHANGE OF AGENT				
NAME: FLORIDA PRE-PLANNING ALLIANCE, INC.				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY X PLAIN STAMPED COPY				
CONTACT PERSON: Eyliena Baker				
EXAMINER'S INITIALS:				

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation of	.0502, 607.1508, or 617.1508, Florida S rganized under the laws of the State of _ rgistered agent, or both, in the State of F	DE
1. The name of t	the corporation: FLORIDA PRE-PLA	NNING ALLIANCE, INC.	
2. The principal	office address: 1900 St. James Plac	e Suite 300 Houston, TX 77056	
2 72 22	The state of the s		
-	address (if different):	Document number: F060000	
·	•		
	I street address of the current register timent of State: (If resigned, enter res	red agent and registered office on file wi signed)	ith the
	CT CORPORATION SYSTEM		77.07
	1200 SOUTH PINE ISLAND ROA	D	9721113 25
	PLANTATION	FL 33324	25
6. The name and (if changed):	d street address of the new registered Corporation Service Company	agent (if changed) and /or registered of	fice ;
	1201 Hays Street		
	PC	D Box NOT acceptable	_
	Tallahassee	FL 32301	_
The street addre as changed will	ess of its registered office and the stable identical.	reet address of the business office of it	s registered agent,
Such change wa authorized by th	as authorized by resolution duly add ne board, or the corporation has been	opted by its board of directors or by an notified in writing of the change.	officer so
Xel	. E. Williami	Jill Cilmi	Vice President
<i>f f</i>	re of an officer or director	Printed or typed name and to	tie
I further agree to of my duties, an document is beil corporation has	the appointment as registered agen to comply with the provisions of all all am familiar with and accept the ng filed merely to reflect a change i been notified in writing of this cha Service, Company	statutes relative to the proper and con obligation of my position as registered in the registered office address. I heref	nplete performance d agent. Or, if this by confirm that the
ву: Жа	7 - 1/2 ha	03/25/2022	
Sign	nature of Registered Agent	Date	· · · · · · · · · · · · · · · · · · ·
If signing on be	half of an entity:		
	Asst. Vice President		
Ty	yped 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

CR2E045 (04/13)