## F0600006740

(Requestor's Name)					
(Address)					
(Address)					
(Addiess)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Certified copies Certificates of Status					
Special Instructions to Filing Officer.					

Office Use Only



500389714585

ÖIVIS.«I. Ğ. «ΘR» ORAŢII TALLĀHASSEF, FI ORIG

RECEIVED
2022 JUN 20 AM II: 25

A. BUTLER
JUN 2 1 2022

OZZ JUN 20 PH 1: 19

CORPORATION SERVICE COMPANY 1201 Hays Street

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

ACCOUNT NO. : I2000000195						
REFERENCE : 731048 4332382						
AUTHORIZATION :						
COST LIMIT : STORE ROLL						
ORDER DATE : June 8, 2022						
ORDER TIME : 10:48 AM						
ORDER NO. : 731048-337						
CUSTOMER NO: 4332382						
CHANGE OF AGENT						
NAME: TIHM MEMBER CORP.						
NAME: IIMM MEMBER CORP.						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY						
XX 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	provisions of sections 607.0502, 617.050 nge is submitted for a corporation orga r to change its registered office or regis.	nized under the laws of the State of $\underline{\mathbb{C}}$	DE	iis	-
1. The name of t	he corporation: TIHM MEMBER CORP				
	office address: 725 FIFTH AVENUE, 26		2		<u>-</u>
3. The mailing a	ddress (if different):				<u>-</u>
4. Date of incorp	poration/qualification: 10/25/2006	Document number: F0600000	06740		
	I street address of the current registered timent of State: (If resigned, enter resign		h the		
	NRAI SERVICES, INC				
	1200 South Pine Island Road				
	Plantation, FL 33324		₩.	2(	
6. The name and (if changed):	street address of the new registered age	nt (if changed) and /or registered office	HV71VI	2022 JUN 20 PH 1: 1	rre:
	Corporation Service Company		28.50 28.50	0	1
	1201 Hays Street		)FS	<u> </u>	1
	P.O. Bo	NOT acceptable			
	Tallahassee	FL 32301	L.J.	9	
The street addre	ss of its registered office and the street be identical.	address of the business office of its	registere	ed agen	i,
Such change wa authorized by th	is authorized by resolution duly adopte the board, or the corporation has been no	d by its board of directors or by an obtified in writing of the change.	fficer so		
	Lie E. Cienie	Jill Cilmi, Vice President			
Signatui	of in officer or director	Printed or typed name and title	Ē		
I further agree t of my duties, an document is bei corporation has	the appointment as registered agent at a comply with the provisions of all stated I am familiar with and accept the objug filed merely to reflect a change in the been notified in writing of this change in Service Company	utes relative to the proper and comp ligation of my position as registered le registered office address. I hereby	olete perf agent. ( confirm	formand Or, if th that th	ce is ie
Bv: 🗘	see t-Kuby	06/15/2022			
Sign	nature of Registered Agent	Date			
If signing on bel	half of an entity:				
<del></del>	Asst. Vice President				
15	ped or Printed Name	SE 03-00 + 4 +			
	* * * FILING FI	9E: 535.00 * * *			

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