

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000236050 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet

_		
1	\sim	-

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (954)208-0845 Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

REGISTERED AGENT CHANGE CUMMING MANAGEMENT GROUP, INC.

Certificate of Status	0
Certified Copy	I
Page Count	02
Estimated Charge	\$43.75

Electronic Filing Menu — Corporate Filing Menu



To:

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

statement of chang	ge is submitted for a corporation orga	02, 607-1508, or 617,1508. Florida Statutes, this nized under the laws of the State of California tered agent, or both, in the State of Florida.	_
1. The name of the 2. The principal of	e corporation: CUMMING MANAGEM ffice address: 276 Post Road West, 2nd	MENT GROUP, INC.	<u> </u>
3. The mailing add	dress (if different):		
4. Dateofincorpor	ation/qualification: 09/08/1997	Document number: F07000002059	
	treet address of the current registered nent of State: (If resigned, enter resign	agent and registered office on file with the ed)	
C	CORPORATION SERVICE COMPANY		
1	201 HAYS STREET		
<u> </u>	ALLAHASSEE, FL 32301		
6. The name and s (ifchanged):	treet address of the new registered age	ent (if changed) and /or registered office	3
	C T Corporation System		
I	200 South Pine Island Road	: -5	-
_	P.O Bo	NOT acceptable	
	Plantation, Florida 33324	ox NOT acceptable	
The street address as changed will be	of its registered office and the street e identical.	address of the business office of its registered age	ent,
Such change was authorized by the	authorized by resolution duly adopte board, or the corporation has been no	d by its board of directors or by an officer so officed in writing of the change.	
/s/ Anas Al Jajeh Signature of an officer or director		ANAS AL JAJEH, SECRETARY	
Signature o	of an officer or director	Printed or typed name and title	_
I hereby accept th I further agree to of my duties, and document is being corporation has b	e appointment as registered agent ar comply with the provisions of all sta I am familiar with and accept the ob I filed merely to reflect a change in the een notified in writing of this change	nd agree to act in this capacity. Lutes relative to the proper and complete performe ligation of my position as registered agent. Or, if he registered office address. I hereby confirm that	ince this the
C T Corporation S	ystem San Chumb	96/21/2023	_
<u> </u>	ure of Registered Agem	Date	
If signing on beha	df of an entity:		
SEAN L. EMERIC	K, ASSISTANT SECRETARY		
Гуре	d or Printed Nume		
	* * * FILING F	EE: \$35.00 * * *	
Ман	MAKE CHECKS PAYABLE TO FI. I. TO: DIVISION OF CORPORATIONS, F	ORIDA DEPARTMENT OF STATE LO, BOX 6327, TALLAHASSEE, FL 32314	

CR2E045 (04/13)

Ву: