6/29/23, 11:52 AM	Florida Department of State Division of Corporations	767	7
	Electronic Filing Cover Sheet		

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.

(((H230002308713)))



H230002308713ABC-

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

To:

10.			
	Division of Cos	porations	2
	Fax Number	: (850)617-6380	2023
From:			JUN
	Account Name	: COMPUTERSHARE	
	Account Number	: 110432003053	- 29 :
	Phone	: (561)694-8107	,
	Fax Number	: (561)214-8442	
			َ فِ
Inter the em	ail address for	this business entity to be used :	for future
annual re	eport mailings.	Enter only one email address plea	.se.**

Email Address:____



Electronic Filing Menu Co

Corporate Filing Menu



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

1. The name of the corporation: JOHNSON, KENDALL & JOHNSON BENEFITS, INC.

2. The principal office address: 109 PHEASANT RUN NEWTOWN, PA 18940

3. The mailing address (if different):

4. Date of incorporation/qualification: _____ Document number: F07000004767

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)

CT CORPORATION SYSTEM

1200 S PINE ISLAND RD

PLANTATION, FL 33324

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

Corporate Creations Network Inc.

801 US Highway 1

North Palm Beach FL 33408

ាទ

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

P.O. Box NOT acceptable

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.

mature of an officer of director

Marja Souza, Attorney-in-Fact Printed of typed same and little

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 the 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 Re

06/28/2023

Date

1023 JUN 29 AH 9:

80

If signing on behalf of an entity:

Marja Souza, Special Secretary

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 CR2B045 (04/13)