F070000000025

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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RAZ RO Charge



A. RAMSEY
JUN 3 0 2023

CORPORATION.SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195			
REFERENCE : 813903 8414720			
AUTHORIZATION:			
COST LIMIT : \$ 35.00			
ORDER DATE : June 14, 2023			
ORDER TIME : 9:08 AM			
ORDER NO. : 813903-036			
CUSTOMER NO: 8414720			
CHANGE OF AGENT			
NAME: APPLE EIGHT SERVICES JACKSONVILLE, INC.			
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	nge is submitted for a corporation	7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Virginia registered agent, or both, in the State of Florida.
1. The name of t	the corporation: APPLE EIGHT SE	ERVICES JACKSONVILLE, INC.
2. The principal	office address: 814 East Main Stre	eet, Richmond, VA 23219
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification: 12/10/2007	Document number: F0700006025
	l street address of the current registe tment of State: (If resigned, enter re	ered agent and registered office on file with the esigned)
	C T Corporation System	
	1200 South Pine Island Road	
	Plantation	FL 33324
6. The name and (if changed):	_	d agent (if changed) and /or registered office
	Corporation Service Company 1201 Hays Street	
	P	ب نسر O. Box NOT acceptable
	Tailahassee	FL 32301
-		street address of the business office of its registered agent,
Such change was authorized by the	s authorized by resolution duly ad e board, or the corporation has be	opted by its board of directors or by an officer so en notified in writing of the change.
Xie	e 2 agrie	Jill Cilmi, Vice President
I hereby accept I further agree t of my duties, an document is bein corporation has	e of an officer or director the appointment as registered age o comply with the provisions of all d I am familiar with and accept the ng filed merely to reflect a change been notified in writing of this che n Service Company	Printed or typed name and title nt and agree to act in this capacity. I statutes relative to the proper and complete performance e obligation of my position as registered agent. Or, if this in the registered office address, I hereby confirm that the ange.
By: ()	N X es	06/29/2023
	ature of Registered Agent	Date
If signing on bel	nalf of an entity:	
<u> </u>	Asst. Vice President ped 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)