## F0900000487

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CORPORATION SERVICE COMPANY

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

ACCOUNT NO. : I2000000195		
REFERENCE : 100790 842938	0	
AUTHORIZATION :	ı	
COST LIMIT : \$ 35.00		
ORDER DATE: October 31, 2023	>	
ORDER TIME : 10:28 AM		
ORDER NO. : 100790-059		
CUSTOMER NO: 8429380	1	
	<u>.</u> 	
CHANGE OF AGENT		
NAME: CRYSTAL MOVER SERVICES, 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 corpora	02, 617.0502, 607.1508, or 617.1508, Florida Statutes, ation organized under the laws of the State of Delawi ce or registered agent, or both, in the State of Florida.	are
	the corporation: CRYSTAL M		
2. The principal	office address: 815 NW 57th	Avenue, Suite 222, Miami, FL 33126	
	<u> </u>		
_	address (if different):		
4. Date of incor	poration/qualification: 02/05/2	2009 Document number: F09000000487	
	d street address of the current range of the current range.	registered agent and registered office on file with the inter resigned)	
	Incorporating Services, Ltd.		
	1540 Glenway Drive		
	Tallahassee	FL 32301	٠,
6. The name and (if changed):	street address of the new region Corporation Service Compa	istered agent (if changed) and /or registered office	
	1201 Hays Street		
	Taflahassee	P.O. Box NOT acceptable  FL 32301	
The street addre	ess of its registered office and be identical.	the street address of the business office of its registe	ered agent,
		aly adopted by its board of directors or by an officer as been notified in writing of the change.	
$X_{i}$	2. 2 COME	Jill Cilmi, Vice President	
I hereby acgept I further agree to of my duties, an document is beit corporation has Corporation	the appointment as registered to comply with the provisions of I am familiar with and accept filed merely to reflect a chief been notified in writing of the Service Company	Printed or typed name and title  d agent and agree to act in this capacity. of all statutes relative to the proper and complete pe ept the obligation of my position as registered agent, ange in the registered office address, I hereby confinits is change.	erformanc Or, if thi. "m that the
Bv: ()	'u M Lei	11/21/2023	
Sigi	nature of Registered Agent	Date	
If signing on bel	half of an entity:		
	Asst. Vice President	<del></del> -	

\* \* \* FILING FEE: \$35.00 \* \* \*