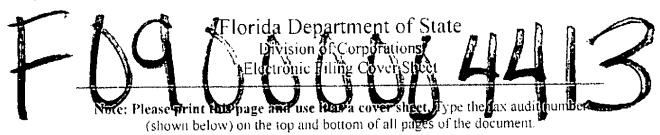
5/31/22, 12:23 PM

Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : URS AGENTS LLC Account Number : I20150000127 : (800)567-4397

Fax Number

: (800)567-4398

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 NATIONAL LIBRARY RELOCATIONS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

M. SOLOMON

Electronic Filing Menu

Corporate Filing Menu

Help

To.

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: NATIONAL LIBRARY RELOCATIONS, INC. Name of Corporation		
DOCUMENT NUMBER: F09000004413		
The enclosed Statement of Change of Registered Office/Agent and fee are submitted	l for filing.	
Please return all correspondence concerning this matter to the following:		
VALERIE MILLER		
Name of Contact Person		
NATIONAL LIBRARY RELOCATIONS, INC.		
Firm/Company		
70 BRIDGE ROAD		9
Address		91199
ISLANDIA, NY 11749		κ ≽ ~<
City/State and Zip Code		- د
vaterie@ntrbookmovers.com	=	~
E-mail address: (to be used for future annual report notification)	***	Y E
For further information concerning this matter, please call:		\

Enclosed is a \$35.00 check made payable to the Department of State.

MailingAddress: AmendmentSection Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

Name of Contact Person

URS AGENTS C/O LAUREN JOHNSON

Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Area Code & Daytime Telephone Number

CR2E045 (04/13)

CR2E045 (04/13)

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

in order to change its registered office or registered agent, or both, in the State of Florida.		
1. The name of the corporation: NATIONAL LIBRARY RELOCATIONS, INC.		
2. The principal office address: 70 BRIDGE ROAD, ISLANDIA, NY 11749		
3. The mailing address (if different):		
4. Date of incorporation/qualification: 11/09/2009 Document number. F09000004413		
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)		
PABLO PAGAN		
7336 YOUER STREET		
WINDERMERE, FL 34786	1-, 2	202
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		2022 HAY 31
URS AGENTS INC.	13.4 17.4	~
3458 LAKESHORE DRIVE	∷ Ω 1 €4	P
P.O. Box NOT acceptable	89	₩,
TALLAHASSEE, FL 32312	. . ·	7,1
The street address of its registered office and the street address of the business office of its regist as changed will be identical.	iered agent,	
Such change was authorized by resolution duly adopted by its board of directors or by an officer authorized by the board, or the corporation has been notified in writing of the change.	· \$0	
Scott Miller President Signature of An officer or director Signature of An officer or director Signature of An officer or director		
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 of my duties, and I am familiar with and accept the obligation of my position as registered agent document is being filed merely to reflect a change in the registered office address, I hereby conformation has been notified in writing of this change.	performance t. Or, if this firm that the	?
5.31.2022		
Signature of Registered Agent		
If signing on behalf of an entity:		
Kanetha Bishop, Asst. 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		