12/27/23, 10:54 AM



Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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REGISTERED AGENT CHANGE THE BRUSS COMPANY

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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Hinois registered agent, or both, in the State of Florida.	_
	the corporation: THE BRUSS CON		
2. The principal	office address: 2200 DON TYSON	PKWY, SPRINGDALE, AR 72762	<u> </u>
3. The mailing a	address (if different): PO Box 2020	CP131, SPRINGDALE, AR 72765-2020	
4. Date of incorp	poration/qualification: 02/23/2012	Document number: F12000000813	
	I street address of the current regist tment of State: (If resigned, enter t	tered agent and registered office on file with the resigned)	
	CT CORPORATION SYSTEM		
	1200 South Pine Island Road		
	PLANTATION, FL 33324		
6. The name and (if changed):	d street address of the new registere	ed agent (if changed) and /or registered office	
	United Agent Group Inc.		
	801 US Highway 1		
	North Palm Beach, FL 33408	P.O. Box NOT acceptable	
The street addre as changed will	ess of its registered office and the be identical.	street address of the business office of its registered ag	ent,
Such change wa authorized by th	is authorized by resolution duly a ne board, or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.	
Ha	125	Marja Souza, Attorney-in-Fact	
Signiii I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as registered ag to comply with the provisions of a d I am familiar with and accept to ng filed merely to reflect a chang been notified in writing of this co	Printed or typed name and title ent and agree to act in this capacity. Il statutes relative to the proper and complete performate the obligation of my position as registered agent. Or, if the registered office address, I hereby confirm that thange.	nce this the
K	nature of Refisiered Agent	12/27/2023	
***	nature of Registered Agent half of an entity:	Date	_
Marja Souza, Spe	•		
	yped or Printed Name		

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