F12000003448

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200378371172

RECEIVED 2022 JAN 18 AMII: 42

FIL. C. S. DOZ JAN 18 AH

2022 JAN 18 AH 8: 15

JÄÄ! " 1

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

	ACCOUNT NO.	: 12000000	195	
	REFERENCE	: 342517	156084A	
	AUTHORIZATION	: 1		
	COST LIMIT	: 23500 Ce	man	.
ORDER DATE :	December 21, 202	1		
ORDER TIME :	10:27 AM			
ORDER NO. :	342517-165			
CUSTOMER NO:	156084A			
CHANGE OF AGENT				
NAMF ·	וו כ פרכוופוד	V ASSOCIATES		
NAME: U. S. SECURITY ASSOCIATES STAFFING, INC.				
PLEASE RETURN	THE FOLLOWING AS	PROOF OF FILE	ING:	
CERTIF	FIED COPY			
	STAMPED COPY			
CONTACT PERSON	I: Alexxis Weila:	nd		

EXAMINER'S INITIALS:

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

statement of c	change is submitted for a corpora	2, 617.0502, 607.1508, or 617.1508, Florida Statutes, this tion organized under the laws of the State of DE 2 or registered agent, or both, in the State of Florida.
1. The name of	of the corporation: U.S. SECU	IRITY ASSOCIATES STAFFING, INC.
		n Street Suite 600, Conshohocken, PA 19428
3. The mailin	g address (if different):	
4. Date of inc	corporation/qualification: 08/20/2	012 Document number: F12000003448
	and street address of the current re partment of State: (If resigned, en	egistered agent and registered office on file with the ter resigned)
	CT CORPORATION SYSTE	M ACC
	1200 SOUTH PINE ISLAND	ter resigned) RD RD RD RD RD RSECULARITE SECULARITE SECULA
	PLANTATION, FL 33324	Son E
6. The name a		stered agent (if changed) and /or registered office
	Corporation Service Compar	ıy
	1201 Hays Street	
	· · · · · · · · · · · · · · · · · · ·	P.O. Box NOT acceptable
	Tallahassee	FL 32301
The street ade	dress of its registered office and vill be identical.	the street address of the business office of its registered agent,
Such change authorized by	was authorized by resolution duly the board, or the corporation ha	ly adopted by its board of directors or by an officer so is been notified in writing of the change.
Zie E almi		Jill Cilmi, Vice President
Signature of the officer or director		Printed or typed name and title
согрогацон і	ept the appointment as registered se to comply with the provisions and I am familiar with and acce being filed merely to reflect a cha has been notified in writing of thi ion Service Company	l agent and agree to act in this capacity. of all statutes relative to the proper and complete performance pt the obligation of my position as registered agent. Or, if this ange in the registered office address. I hereby confirm that the is change.
Ву:	Signature of Registered Agent	01/18/2022
,	Signature of Registered Agent	Date
If signing on	behalf of an entity;	
Grace E. Kirb	y, Asst. Vice President	<u></u>
	Typed or Printed Name	
	* * * FI	LING FEE: \$35.00 * * *

-17

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)