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:	Fax Number	: (850)617-6380	•
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으로 From:			• 1
بارين البارك	Assourt Name	: CORPORATE CREATIONS INTERNATIONAL INC.	_
1.1.1	Account Name		•
공병	Account Number	: 110432003053	
~~ \square	Phone	: (561)694-8107	
.남쪽	Fax Number	: (561)214-8442	
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Kitter rue	email address to	r this business entity to be used for fut	II E
annual annual	report mailings.	Enter only one email address please.**	
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REGISTERED AGENT CHANGE NORTHCOAST WARRANTY SERVICES, INC.

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Corporate Filing Menu

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

tatement of cha	nge is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida Statutes, the norganized under the laws of the State of Delawate registered agent, or both, in the State of Florida.	
	the corporation: Northcoast Warra		
The name of the	the corporation:	VE E, 21ST FLOOR, CLEVELAND, OH 44114	
. The principal	office address.		
3. The mailing a	ddress (if different):		
l. Date of incorp	poration/qualification: 04/01/2013	Document number: F13000001424	
	d street address of the current registement of State: (If resigned, enter	stered agent and registered office on file with the resigned)	
	CORPORATION SERVICE COM	1PANY	
	1201 HAYS STREET		202
	TALLAHASSEE, FL 32301-2525		2022 JAN
. The name and (if changed):	d street address of the new register	red agent (if changed) and /or registered office	119 AM
	United Agent Group Inc.		œ -Æ
	801 US Highway 1	<u> </u>	36
		P.O. Box NOT acceptable	
	North Palm Beach, FL 33408		
The street address changed will	ess of its registered office and the be identical.	e street address of the business office of its registered	d agent,
Such change was	as authorized by resolution duly a ne board, or the corporation has b	adopted by its board of directors or by an officer so been notified in writing of the change.	
/	ani Dutan	Kevin Duteau, Attorney-in-Fact	
	re of an officer or director	Printed or typed name and title	
furiner agree if my duties, an locument is bei corporation has	to comply with the provisions of a lam familiar with and accept to reflect a change to been notified in writing of this c	gent and agree to act in this capacity. all statutes relative to the proper and complete perfo the obligation of my position as registered agent. Of ge in the registered office uddress, I hereby confirm t change.	ormance r, if this that the
/-	Lani Dutan	01/19/2022	
Sig	nature of Registered Agent	Date	
f signing on be	half of an entity:		
Kevin Dutcau, S	pecial Secretary		
7	yped or Printed Name	-	

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