

⊙ 05/24/<u>2024 7:</u>35 AM

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H240001858283ABC5 Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. Fax Number : (850)617-6380 AH II: From: Account Name : COMPUTERSHARE \circ Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442 202i; ! ' Y **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** -حم 1 Email Address: ______ AH II: 100 **REGISTERED AGENT CHANGE** ELSF, INC. Certificate of Status 0 Certified Copy 0 Page Count 01

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Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of <u>Illinois</u> in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: ELSF, INC.

2. The principal office address: 1315 N. NORTH BRANCH ST., SUITE G, CHICAGO, IL 60642

3. The mailing address (if different): 11426 N JOG RD., PALM BEACH GARDENS, FL 33418

4. Date of incorporation/qualification: 04/19/2013 Document number: F13000001730

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)

Cogency Global Inc.

115 North Calhoun St., Suite 4

Tallahassee, FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporate Creations Network Inc.	; ;]	<u>.</u> 11.	• # * *
801 US Highway 1)		ء بير-جيب جيب ر
P.O. Box NOT acceptable		÷-	e .
North Palm Beach, FL 33408	• 1	AH	1 ·
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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board or the corporation has been notified in writing of the change.

an officer or director Signatur

Adia Myles, Attorney-in-Fact

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 performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address. I hereby confirm that the corporation has been notified in writing of this change.

Signature of Registered Agent

5/24/2024

Date

If signing on behalf of an entity:

Adia Myles, Special 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 CR2E045 (04/13) 23