F13000001945

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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 987033 8285703
AUTHORIZATION : 1
COST LIMIT : \$ 35.00
ORDER DATE : September 14, 2023
ORDER TIME : 1:53 PM
ORDER NO. : 987033-005
CUSTOMER NO: 8285703
CHANGE OF AGENT
NAME: WILLIAM A. RANDOLPH, INC.
·
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
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XX PLAIN STAMPED COPY
CONTACT PERSON: Eyliena Baker
EXAMINER'S INITIALS:

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of <u>Illinois</u> r to change its registered office or registered agent, or both, in the State of Florida.
I. The name of t	he corporation: WILLIAM A. RANDOLPH, INC.
2. The principal	office address: <u>\$20 LAKESIDE DR SUITE 3, GURNEE, IL 6003</u>
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 05/03/2013 Document number: F13000001945
	I street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
*	Corporation Service Company
	1200 SOUTH PINE ISLAND ROAD
	PLANTATION, FL 33324
6. The name and (if changed):	PLANTATION, FL 33324 I street address of the new registered agent (if changed) and /or registered office Corporation Service Company
	
	1201 Hays Street P.O. Box. NOT acceptable
	Tallahassee FL 32301
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change.
Jan January 1	Patrick Scaletta, Asst Sec.
I further agree t of my duties, and document is bein corporation has	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance of Lam familiar with and accept the obligation of my position as registered agent. Or, if this not filed merely to reflect a change in the registered office address. I hereby confirm that the speed to writing of this change. To Service Company
By: Melisaa	t Clarks 09/14/2023 nature of Registered Agent Date
	half of an entity:
	ke, Asst. V.P.
•	* * * 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)