Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000281722 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

From:

Division of Corporations

Fax Number : (850)617-6380

Account Name : UNITED AGENT GROUP INC.

Account Number : 120160000086 Phone : (561)508-5033 Fax Number : (561)694-1639

Enter the email address for this business entity to be used for future of annual report mailings. Enter only one email address places to annual report mailings. Enter only one email address please.\*\*

Email Address:

## REGISTERED AGENT CHANGE GEORGIA-PACIFIC BBH, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

JUL 2 6 2021

S. PRATHER

Electronic Filing Menu

Corporate Filing Menu

Help

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

Pursuant to the	provisions of sections 607.0502, 617.050	02, 607.1508, or 617.1508, Florida Stat	utes, this		
in ord	ange is submitted for a corporation organ	nized under the laws of the State of DEI	AWARE		
	er to change its registered office or regist		ida.		
1. The name of	the corporation: GEORGIA-PACIFIC BB				
2. The principal	office address:	anta, GA 30303-5605			
3. The mailing a	address (if different):	E, Atlanta, GA 30303-5605			
	poration/qualification: 05/14/2013		1		_
5. The name and Florida Depar	d street address of the current registered a timent of State: (If resigned, enter resigne	gent and registered office on file with the	ae		•
	CT CORPORATION SYSTEM				
	1200 S PINE ISLAND RD				
	PLANTATION, FL 33324			20:	
6. The name and (if changed):	street address of the new registered agen	at (if changed) and /or registered office	USATASS	2021 JUL 23	
	UNITED AGENT GROUP INC.		<u>(π</u> .π.		
	801 US HIGHWAY 1		20 Z	AH 8:	$\bigcirc$
		NOT acceptable	<u>-24</u> €		
	NORTH PALM BEACH, FL 33408			_	
The street addre	ss of its registered office and the street a be identical.	address of the business office of its reg	istered a	gent,	
Such change was outhorized by the	s authorized by resolution duly adopted e board of the corporation has been not	by its board of directors or by an officified in writing of the change.	er so		
		Gerald A. Shirk, by Adia Myles, Attorney-in-			
Signature	Walfortices or director	Printed of typed name and title		_	
hereby accept the further agreement for the further agreement of the function has been been described as the function of the function of the function has the function of the	he appointment as registered agent and comply with the provisions of all statul I am familiar with and accept the oblig g filed merely to reflect a change in the been nutified in writing of this change.	agree to act in this capacity tes relative to the proper and complete ation of my position as registered age registered office address, I hereby cor	: perform nt. Or, i nfirm tha	ance f this t the	
		07/23/2021			
Signa	nture of Registered Agent	Date		_	
signing on beh	alf of an entity:				
Adia Myles, Spec	ial Secretary				
Тур	ed 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)