## F13 6600003732

(Ř	lequestor's Name)	
(A	ddress)	
•	•	
(A	ddress)	
(C	ity/State/Zip/Phone #)	
	,	
PICK-UP	MAIT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of S	status
		· · · - · · · ·
Special Instructions to Fil	ling Officer:	

Office Use Only



800411358748

2023 JUL -5 1110: 20 2023 JUL -5 PH

CORPORATION SERVICE COMPANY

NAME: LEI, INC

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	: 120000000	195	
	REFERENCE	: 830103	8417838	
	AUTHORIZATION	Soull es	,	
	COST LIMIT	: \$85.00	202	
ORDER DATE :	June 22, 2023			
ORDER TIME :	10:55 AM			2023 JUL
ORDER NO. :	830103-003			
CUSTOMER NO:	8417838			n '
				<u> </u>
	CHANGE OF A	<u>GENT</u>	<del>-</del>	raido: 20

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

YX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland-sorenson

EXAMINER'S INITIALS:

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

statement of cha	nge is submitted for a corporation org	1502, 607.1508, or 617.1508, Florida Statut ganized under the laws of the State of LOUI istered agent, or both, in the State of Florid	SIANA
1. The name of t	the corporation: LEI, INC.		
2. The principal INDEPENDEN	office address: 11441 FONTANA LN		
3. The mailing a	ddress (if different): PO Box 550 Inde	ependence, LA 70443	
	poration/qualification: 08/27/2013	Document number: F1300000373	32
5. The name and		d agent and registered office on file with the gned)	:
	CT CORPORATION SYSTEM		
	1200 S PINE ISLAND RD		
	PLANTATION	FL 33324	202
6. The name and (if changed):	street address of the new registered a	gent (if changed) and /or registered office	2023 JUL -5
	Corporation Service Company		
	1201 Hays Street		I.; 10: 21
	P.O	Box NO f acceptable	21
	Tallahassee	FL 32301	
The street addre	ess of its registered office and the stre be identical.	et address of the business office of its regi	stered agent,
Such change wa authorized by th	is authorized by resolution duly adopte board, or the corporation has been	ted by its board of directors or by an office notified in writing of the change.	er so
$\lambda_{\rm u}$	2 COME	Jill Cilmi, Vice President	
Signatui	re of an officer or director	Printed or typed name and title	
I furitier agree i of my duties, an document is bei corporation has	the appointment as registered agent of comply with the provisions of all standard accept the of all standard accept the of the final accept the office of the confidence of the confidence of this change in Service Company	atules relative to the proper and complete bligation of my position as registered age the registered office address, I hereby con	performance nt. Or, if this nfirm that the
By: I no		07/05/2023	
Sign	nature of Registered Agent	Date	
If signing on be	half of an entity:		
	Asst Vice President		
l)	ped or Printed Name  * * * FILING 1	FEE: \$35.00 * * *	
	LILING	- 4282F WW.19777	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314