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CORPORATION SERVICE COMPANY 1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE : 745210 85691A
AUTHORIZATION Squelle Man
COST LIMIT : (\$-35.00
ORDER DATE : June 15, 2022
ORDER TIME : 2:10 PM
ORDER NO. : 745210-106
CUSTOMER NO: 85691A
CHANGE OF AGENT
NAME: PATTISON SIGN GROUP INC.
NAME: PATITION SIGN GROUP INC.
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
CONTACT PERSON: Alexxis Weiland
EXAMINER'S INITIALS:

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

statement of cha	provisions of sections 607.0502, 61 inge is submitted for a corporation of to change its registered office or r	organized under the law:	s of the State of _	DELAW		_
I. The name of t	he corporation: PATTISON SIGN C	ROUP INC.				
	office address: it Cordova Street Vancouver, Briti					
3. The mailing a	ddress (if different):					—
4. Date of incorp	oration/qualification: 01/13/2014	Document no	umber: F140000	00164		
5. The name and	street address of the current registe tment of State: (If resigned, enter re	red agent and registered				
	CT CORPORATION SYSTEM			, .	~	
	1200 S PINE ISLAND RD	0 S PINE ISLAND RD			1022 JUN 22	=
	PLANTATION	FL	33324		型2	•
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered offi				2 AM 10: 4	م میں۔ ا
	Corporation Service Company				*	
	1201 Hays Street	O. Box NOT acceptable				
	Tallahassee FL 32301					
_	ss of its registered office and the s be identical. s authorized by resolution duly ad e board, or the corporation has be					ent.
authorized by th	0 0 - 1	_	_			
lignatur	e of an officer or director	Jill Cilmi, Vice Pr	or typed name and titl	<u>e</u>		
l furth er agrée t of my duties, and document is beir corporation has	the appointment as registered age to comply with the provisions of all I am familiar with and accept the filed merely to reflect a change been notified in writing of this change Service Company	nt and agree to act in the statutes relative to the eobligation of my posite in the registered office ange.	nis capacity, proper and com ion as registered address, I hereb	plete per agent, v confiri	rforma Or, if m that	ince this the
Зу: <u>У</u>)	son T-Kinhla	06/21/2022				
_	aure of Registered Ağanı nalf of an entity:		Date			•
Grace E. Kirby A	Asst. Vice President					
	ped or Printed Name					

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