

F140000000730

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

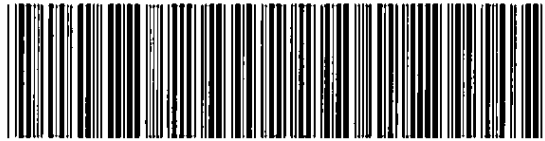
(Business Entity Name)

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SEP 17 2021
I ALBRITTON

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

ACCOUNT NO. : I20000000195

REFERENCE : 995845 7855256

AUTHORIZATION

COST LIMIT : \$ 35.00

ORDER DATE : September 13, 2021

ORDER TIME : 3:22 PM

ORDER NO. : 995845-019

CUSTOMER NO: 7855256

CHANGE OF AGENT

NAME: BRIDGESPIRE FINANCIAL
SERVICES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS:

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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 NV _____ in order to change its registered office or registered agent, or both, in the State of Florida.

- MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)