F14000005118

| (Re | questor's Name) | |
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| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone #) | |
| PICK-UP | ☐ WAIT | MAIL MAIL |
| (Bu | siness Entity Name) | |
| (Do | cument Number) | |
| ied Copies | Certificates o | of Status |
| ::40 Instructions to Filin | g Officer: | |
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Office Use Only



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A. BUTLER FEB 17 2023

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

| ACCOUNT NO. : I200 | Ųι | υt | υų | ١Ų | 1 | y | 5 |
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REFERENCE : 497186 8376866

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AUTHORIZATION:

COST LIMIT : \$ 35.00

ORDER DATE : February 14, 2023

ORDER TIME : 1:23 PM

ORDER NO. : 497186-073

CUSTOMER NO: 8376866

CHANGE OF AGENT

NAME: E.J. BROOKS COMPANY

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
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 | mge is submitted for a corporation | 617.0502, 607.1508, or 617.1508, Florida Statu In organized under the laws of the State of <u>Ne</u> v | v Jersey |
|---|--|---|--|
| | | registered agent, or both, in the State of Florid | ła. |
| | the corporation: E.J. BROOKS C | | |
| 2. The principal | office address: 2727 Paces Fern | y Road, Building 2, Suite 300, Atlanta, GA 30 | 339 |
| 3. The mailing a | address (if different): | · | |
| 4. Date of incoη | poration/qualification: 12/02/2014 | Document number: F140000051 | 18 |
| | d street address of the current regis rtment of State: (If resigned, enter | stered agent and registered office on file with the resigned) | е |
| | C T Corporation System | | |
| | 1200 South Pine Island Road | | 2023 FFB |
| | Plantation | FL 33324 | EB . |
| 6. The name and (if changed): | d street address of the new register | ed agent (if changed) and /or registered office | 16 PHZ: 44 |
| | Corporation Service Company | · | |
| | 1201 Hays Street | - | · - |
| | | P.O. Box NOT acceptable | |
| | Tallahassee | FL 32301 | |
| The street addre | ess of its registered office and the be identical. | street address of the business office of its reg | istered agent, |
| Such change was authorized by th | as authorized by resolution duly a ne board, or the corporation has be | idopted by its board of directors or by an offic een notified in writing of the change. | er so |
| Xie | . E agni | Jill Cilmi | |
| oj my aunes, an locument is bei corporation has | the appointment as registered ag to comply with the provisions of a d I am familiar with and accept.th ng filed merely to reflect a chang been notified in writing of this ca n Service Edmpany | Printed or typed name and title tent and agree to act in this capacity. Ill statutes relative to the proper and complete the obligation of my position as registered age to in the registered office address, I hereby con thange. | e performance int. Or, if this infirm that the |
| By: Ce | , m Ley | 02/16/2023 | |
| Sign | nature of Registered Agent | Date | |
| f signing on bel | half of an entity: | | |
| Ami M. Casper | | | |
| Ту | ped or Printed Name | | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)

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