F15000000635

	(Requestor's Name)
	(Address)
	(Address)
	(,
	10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	L. MARE
	(Business Entity Name)
	(Document Number)
	(Bocament Namber)
Certified Copies	Certificates of Status
Special Instructions to	Siling Officer
Shecial instructions to	Tring Offica.
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<u>.</u>	
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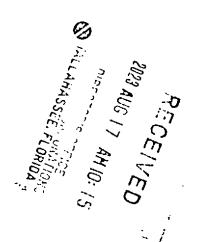
Office Use Only



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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

		ACCOUNT #: I20160000072
UMBER OF CERTIF	ICATES REQUESTED	
DUNTRY OF DESTI	NATION	
	""APOSTILLE" /	NOTARIAL CERTIFICATION**
		/ 1/2
	Certificate of Good	Standing
	Certified Copy of A	
	PLEASE OBTAIN THE	E FOLLOWING FOR THE ABOVE ENTITY
	Certificate of Statu	······································
	Certified Copy	
XXXXXXX	Plain Copy	
	PLEASE FILE	THE ATTACHED AND RETURN
OCUMENT NUMBE	:R	
NTITY NAME INT	ERNATIONAL PROTI	ECTIVE SERVICE, INC. (IPS)
		**WALK I

COVER LETTER

TO:

Amendment Section Division of Corporations

Name of Corporation	IVE SERVICE, INC. (IPS)
DOCUMENT NUMBER: F15000000635	
The enclosed Statement of Change of Registere	d Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Harbor Compliance	
Name of Contact Person	
Firm/Company	
1830 Colonial Village Lane	
Address	
Lancaster, PA 17601	
City/State and Zip Code	
licensing@ipsglobal.co	om
E-mail address: (to be used for future annua	
For further information concerning this matter,	please call:
Dana Micciche	at (717) 431-9166 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the	Department of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of cha	nge is submitted for a corporation or	0502, 607.1508, or 617.1508, Florida ganized under the laws of the State of g gistered agent, or both, in the State of I	New Mexic		
	he corporation: INTERNATIONAL PR	•			
	office address: 4901 McLeod Rd NE				
	ew Mexico 87109				
	ddress (if different): PO Box 27527	Albuquerque, New Mexico 87125	-		
		Document number: F150000	000635		
5. The name and		ed agent and registered office on file w			
	NORTHWEST REGISTERE	ED AGENT LLC.			
	7901 4TH STREET N SUIT	E 300	_		
	Saint Petersburg, FL 33702		JA;	202	
6. The name and (if changed):	I street address of the new registered	agent (if changed) and /or registered of	-U.S. 156	2023 AUG 17	
	Registered Agents Inc		سر. دیار		
	7901 4th St N Ste 300			AH 9:	
	St. Petersburg, Florida 3370). Box NOT acceptable 02	AIIE JAIDA	: 42	
The street addre	ess of its registered office and the str be identical.	reet address of the business office of it	ts registe	red ag	gent.
Such change wa authorized by th	s authorized by resolution duly ado the board, or the corporation has been	pted by its board of directors or by an notified in writing of the change.	officer s	ю	
/s/ Aaron Todd Jones		Aaron Todd Jones-Officer			
I hereby accept I further agree t of my duties, an document is bei	e of an officer or director the appointment as registered agen o comply with the provisions of all , d I am familiar with and accept the ng filed merely to reflect a change i been notified in writing of this chai	statutes relative to the proper and con obligation of my position as registere n the registered office address, I herei		erform Or ij m tha	ance of this of the
<i>ेगावे दि</i> खाङ		8/16/2023			
	nature of Registered Agent	Date			_
If signing on be	half of an entity:				
David Robe	rts				
Ty	ped 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)