F15000003998

(R	lequestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	WAIT [MAIL
(8	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of St	atus
Special Instructions to	Filing Officer:	
	J. HORNE	
	JUL - Z 2024	
	Office Use Only	



RECEIVED



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

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	ACCOUNT NO.	:	120000001	95
	REFERENCE	:	503201	8328014
	AUTHORIZATION	:		
	COST LIMIT	:	\$ 35.00	
ORDER DATE :	June 18, 2024			
ORDER TIME :	2:39 PM			
ORDER NO. :	503201-080			
CUSTOMER NO:	8328014			

CHANGE OF AGENT

NAME: SOUTHERN CONSUMERS ALLIANCE

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPYXXPLAIN STAMPED COPY

CONTACT PERSON: Shauna Godbolt

EXAMINER'S INITIALS:

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

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

1. The name of the corporation: SOUTHERN CONSUMERS ALLIANCE, INC.

2. The principal	office address:				
12444 Powerso	ourt Drive, Ste 500A St.	Louis, MO 63131			
3. The mailing a	ddress (if different):		<u>.</u>		
4. Date of incorp	poration/qualification: 09	9/09/2015	Document ni	unber: F15000003984	
	I street address of the curr tment of State: (1f resigne		id registered	office on file with the	
	C T CORPORATION S	SYSTEM		, <u></u>	
	1200 SOUTH PINE ISL	AND ROAD			
	PLANTATION		FL	33324	r
6. The name and (if changed):	street address of the new	registered agent (if ch	anged) and	/or registered office	MAR EL
	Corporation Service Co	ompany			
	1201 Hays Street				
	P.O. Box: NOF acceptable			÷	
	Tallahassee		FL	32301	5

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

/S/ Karen Boeker	Karen Boeker	Secretary
Signature of an officer or director	Printed or typed name and title	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address. Thereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company

ro CKUDI Signature of Registered Agent By:

06/14/2024

Date

If signing on behalf of an entity:

GRACE E. KIRBY, ASST. VICE PRESIDENT

Typed 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) 503201-80