F1600004984

(Requestor's Name)			
	Address)			
(Address)			
(1	City/State/Zip/Phone #)			
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(Business Entity Name)				
(Document Number)				
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DIVISIUM OF LURFORATION TALLAHÄSSEE, FLORIDA

RECEIVED

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1022 JUN 13 AM II: 0

SECRETARY OF SET

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 732116 8087058

AUTHORIZATION :

COST LIMIT : \$ \$5.00

ORDER DATE : June 8, 2022

ORDER TIME : 12:52 PM

ORDER NO. : 732116-207

CUSTOMER NO: 8087058

CHANGE OF AGENT

NAME: ZEALANDIA HOLDING COMPANY,

INC.

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	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida State organized under the laws of the State of $\frac{NV}{N}$ registered agent, or both, in the State of Flori		
1. The name of t	he corporation: ZEALANDIA HOLDING	G COMPANY, INC.		
	office address: One Vance Gap R			
			_	
4. Date of incorp	incorporation/qualification: 11/04/2016 Document number: F16000004984			
5. The name and		stered agent and registered office on file with the		
	CORPORATE CREATIONS NE	ETWORK INC.		
	801 US HIGHWAY 1			
	NORTH PALM BEACH, FL 334	08		
6. The name and (if changed):	street address of the new register	ed agent (if changed) and /or registered office	022 JUN 13 SECRETARY ALLAHASSE	
	Corporation Service Company		%; }} 3	
	1201 Hays Street		AM II: 0 OF STAIL OF LUBB	
		P.O Box NOT acceptable	= = =	
	Tallahassee	FL 32301	306	
The street addre	ss of its registered office and the be identical.	street address of the business office of its re	gistered agent,	
Such change wa authorized by th	s authorized by resolution duly a e board, or the corporation has b	dopted by its board of directors or by an officen notified in writing of the change.	cer so	
\mathcal{Q}	e & Course	Jill Cilmi, Vice President		
Signatur	e of an officer or director	Printed or typed name and title		
I further agree t of my duties, and document is beit corporation has	the appointment as registered ag o comply with the provisions of a d I am familiar with and accept t ng filed merely to reflect a chang been notified in writing of this a n Service Company	tent and agree to act in this capacity, all statutes relative to the proper and comple the obligation of my position as registered ag te in the registered office address, I hereby co hange.	te performance yent. Or, if this onfirm that the	
By: Dros	et-Kuby	06/10/2022		
Sign	nature of Registered Agent	Date		
If signing on bel	nalf of an entity:			
Grace E. Kirby, <i>i</i>	Asst. Vice President			
	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 * * *