F1700000000434

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
Special instructions to 1 ming ember.			
-			

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CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

REGISTRATION SECTION DIVISION OF CORPORATIONS To:

Anthony Arthur anthony.arthur@cscglobal.com From:

Date: October 30, 2020

Order#: 458969-002

Re: ACP FACILITY SERVICES, INC.

Enclosed please find:

Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

File in your office on a routine basis.

XX Issue Proof of Filing.
XX Please return evidence to the following:

Attn: Anthony Arthur

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

OUCA.XCOA

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

statement of char	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of MA registered agent, or both, in the State of Florida.	
1. The name of the	he corporation: ACP FACILITY SE	RVICES, INC.	
2. The principal			
3. The mailing a	ddress (if different): PO Box 2411	, WOBURN, MA 01888	
		Document number: F1700000434	
	street address of the current regist ment of State: (If resigned, enter r	ered agent and registered office on file with the esigned)	
	O'BRIEN, THERESA C		
	47 S HAMILTON SPRINGS RD		
	ST AUGUSTINE	FL 32084	
6. The name and (if changed):	street address of the new registere Corporation Service Company	ed agent (if changed) and /or registered office	2 NOV -3
	1201 Hays Street		وي
		P.O Box NOT acceptable	ج: ون
	Tallahassee	FL 32301	(, C,
as changed will	be identical.	street address of the business office of its registered a	gent,
authorized by th	e board, or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.	
_ <u>Xie 8.</u>	agni	Jill Cilmi, Vice President	
I further agree to of my duties, and document is being corporation has	o comply with the provisions of a	Printed or typed name and title ent and agree to act in this capacity. Il statutes relative to the proper and complete perform the obligation of my position as registered agent. Or, the in the registered office address, I hereby confirm the thange.	nance if this at the
By: Un	ace Cokuble	10/28/2020	
Sign	nature of Registered Agent	Date	
If signing on bel	tan of an entity.		
	Assistant Vice President ped or Printed Name		

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

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

in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: ACP FACILITY SERVICES, INC. 2. The principal office address:
2. The principal office address: 1 Merrill St WOBURN MA 01801 3. The mailing address (if different): PO Box 2411, WOBURN, MA 01888 4. Date of incorporation/qualification: 01/30/2017 Document number: F17000000434 5. The name and street address of the current registered agent and registered office on file with the
4. Date of incorporation/qualification: 01/30/2017 Document number: F17000000434 5. The name and street address of the current registered agent and registered office on file with the
4. Date of incorporation/qualification: 01/30/2017 Document number: F17000000434 5. The name and street address of the current registered agent and registered office on file with the
O'BRIEN, THERESA C
47 S HAMILTON SPRINGS RD
ST AUGUSTINE FL 32084
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Corporation Service Company 1201 Hays Street
1201 Hays Street
P.O. Box NOT acceptable
Tallahassee FL 32301
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.
Jill Cilmi, Vice President
Signature of an officer or director 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, I hereby confirm that the corporation has been notified in writing of this change. Corporation Service Company
By: 10/28/2020
Signature of Registered Agent Date
If signing on behalf of an entity:
Grace E. Kirby, Assistant Vice President Typed or Printed Name

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