F1700002521

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
(,,, =	,
	TIAW	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Eiling Officer	
	i mig enteen	
	Office Use Only	,



RECEIVED FUNCTIONS

of 5/13/2022

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

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	ACCOUNT NO.	:	1200000001	95	
	REFERENCE	:	655108	5057753	
	AUTHORIZATION	: .	" autole	man	
	COST LIMIT	:	\$ 35.00		
			.		
ORDER DATE :	May 3, 2022				
ORDER TIME :	8:35 AM				
ORDER NO. :	655108-156				
CUSTOMER NO:	5057753				
		- ·			 _
	CHANGE OF A	<u>.GEN'</u>	<u>r</u>		

NAME: BARR INTERNATIONAL SERVICES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPYXXPLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland

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 <u>Delaware</u> in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: ______BARR INTERNATIONAL SERVICES, INC.

2. The principal office address: 400 Interpace Parkway, Bldg. A, Parsippany, NJ 07054

The mailing address (if different): ______

4. Date of incorporation/qualification: 06/02/2017 _____ Document number: F17000002521

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

	Corporate Creations Network Inc.			
	801 US Highway 1			
	North Palm Beach	FL 33408	202: SEU	
6. The name and s (if changed):	street address of the new registered agent			
	Corporation Service Company	ن د		ţ.
	1201 Hays Street	ľ.		\bigcirc
	P.O. Box N	IOT acceptable	-4 -	
	Tallahassee	FL 32301	.т. О	

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.

nature of an officer or director

Jill Cilmi, Vice President

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, I hereby confirm that the corporation has been notified in writing of this change.

Corporation Service Gompany By: gnature of Registered Age

05/06/2022

Date

If signing on behalf of an entity:

Ami M. Casper, 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)