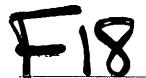
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Florida Department of State
Division of Corporations
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Division of Corporations

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To:

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

statement of ch	provisions of sections 607.0502, 617.0 ange is submitted for a corporation org er to change its registered office or regi	anized under the laws of the State of	Massachusetts
	the corporation: Crosstown Courier Ser		r Iorida.
	the corporation:		
2. The principal	i office address:		
3. The mailing:	address (if different): PO Box 206, Blac	kstone, MA 01504	
	poration/qualification: 8/13/2022		004487
	d street address of the current registered atment of State: (If resigned, enter resigned)		vith the
	Registered Agent Solutions, Inc.		
	2894 Remington Green Lane, Suite A		
	Tallahassee, FL 32308		
6. The name and (if changed):	d street address of the new registered ag	ent (if changed) and /or registered o	ffice
	C T Corporation System		· · · · · · · · · · · · · · · · · · ·
	1200 South Pine Island Road		_
	P.O. I Plantation, F1, 33324	Box NOT acceptable	_
The street address changed will	ess of its registered office and the stree l be identical.	et address of the business office of	its registered agent,
Such change was authorized by the	as authorized by resolution duly adopt he board, or the corporation has been i	ed by its board of directors or by a notified in writing of the change.	n officer so
l	pher D. Moyer	Christopher J. Noyes, President	
Signatu	133B4429 ire of an officer or director	Printed or typed name and	litle
l further agree of my duties, an document is bei	the appointment as registered agent of the comply with the provisions of all stand accept the of ing filed merely to reflect a change in s been notified in writing of this chang	itutes relative to the proper and co digation of my position as register the registered office address, I here	mplete performance ed agent. Or, if this by confirm that the
Steph	ance Honey	11/08/2024	
Sig	gnature of Registered Agent	Date	
If signing on be	ehalf of an entity:		
Stephanie	e Hencz, Assistant Secretary		
Ţ	yped or Printed Name		
	* * * FILING F	EE: \$35.00 * * *	