## F19000003935

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## COVER LETTER

Amendment Section

TO:

Division of Corporations SUBJECT: NORTH ATLANTIC APPRAISAL COMPANY, INC Name of Corporation DOCUMENT NUMBER: F19000003935 The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Kevin Kennedy Name of Contact Person 3H Corporate Services, LLC Firm/Company 36 Long Alley Address Saratoga Springs, NY 12866 City/State and Zip Code sosfilings@3hcs,com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (518) 583-0639 Ext. 133

Area Code & Daytime Telephone Number Kevin Kennedy

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee. FL 32314

Name of Contact Person

Street Address:

Amendment Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	nge is submitted for a corporation	7.0502, 607.1508, or 617.1508, Florida St organized under the laws of the State of $\frac{M}{registered}$ agent, or both, in the State of Flo	fassachusetts
1. The name of t	he corporation: NORTH ATLANTI	IC APPRAISAL COMPANY, INC	
	office address: 32 Crapo Street Mari		
3. The mailing a	ddress (if different): PO Box 1191 !	Marion, MA 02738	
4. Date of incorp	poration/qualification: 08/22/2019	Document number: F19000003	3935
	I street address of the current registe tment of State: (If resigned, enter re	ered agent and registered office on file with esigned)	h the
	3H Agent Services, Inc.		<b>20</b>
	1415 Panther Lane, STE 327		1024 HAY
	Naples, FL 34109		် <u>ခံ</u> မ
6. The name and (if changed):	I street address of the new registere	d agent (if changed) and /or registered office	ED AM 9: 43
	3H Agent Services, Inc.		<u></u>
	2114 NW 40th Terrace, Suite D2		
	Gainesville, FL 32605	P.O. Box NOT acceptable	
		street address of the business office of its	
Such change was	as authorized by resolution duly ac ne board, or the corporation has be	dopted by its board of directors or by an open notified in writing of the change.	officer so
Signatu	re of an of Neet or director	Jona Huan Ask Printed or typed name and title	$\alpha$
I further agree to of my duties, and document is hei	to comply with the provicions of al	ent and agree to act in this capacity. Il statutes relative to the proper and comp te obligation of my position as registered e in the registered office address, I hereby tange.	plete performance agent. Or, if this v confirm that the
\ Lub Au		4/29/2024	_
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Darrell Beich, A	sst. Sec., 3H Agent Services, Inc.		
Т Т	yped 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 \* \* \*