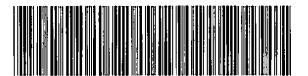
## F20 000005497

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MA	IL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
<b>3</b>	
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Office Use Only



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2021 JULI 10 PH 12: 58



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Joey Parlamenti joey.parlamenti@cscglobal.com

Date: June 8, 2021

Order#: 847716-001

Re: CERTUS FLORIDA, INC.

Enclosed please find:

XX \_\_ Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX \_\_ Please return evidence to the following:

Attn: Joey Parlamenti 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 cha	nge is su	bmitted for a c	orporation orga	02, 607.1308, or 6 nized under the la tered agent, or bot	ws of the Sto	ate of Del	laware	<u> </u>
1. The name of t		-	-		,	Ĵ		
2. The principal	affice ad	denos. 5955 T.(	G. LEE BLVD., \$	STE. 260				
ORLANDO, FL		uress		<del></del>				
3. The mailing a	ddress (i	f different):				_		
4. Date of incorp	oration/o	qualification: _	12/03/2020	Document	number: F2	20000005	497	
			ırrent registered ned, enter resign	agent and registered)	ed office on	file with t	he	
	KAPLA	N, BEN						
	5955 T	G. LEE BLVD	., STE. 260		<u> </u>			
	ORLAN	IDO		FL	32822	<del></del>	202	
6. The name and (if changed):	l street ac	idress of the ne	ew registered age	ent (if changed) an	d /or registe	red office	2021 JUN 1 C	· · · · · · · · · · · · · · · · · · ·
	Corpora	ation Service (	Company				P	1
	1201 H	ays Street					PM 12:	
			P.O. Bo	ox NOT acceptable			250	
	Tallaha	ssee		FL	32301	<u> </u>	<b></b>	
The street address changed will	ess of its be ident	registered offi ical.	ce and the stree	t address of the bu	usiness offic	e of its re	gistered	d agent,
Such change was authorized by the	as author ne board,	or the corpora	tion duly adopte ation has been n	ed by its board of otified in writing	directors or of the chang	by an off ge.	icer so	
Xee	ر کل ر	Went	<u>۔</u>	Jill Cilmi, Vice	President			
Signatu	re of an offi	cer or director		Pnn	ted or typed nan	ne and title		
I further agree to of my duties, and document is bei corporation has	to compl ed I am fo ng filed i s been no	y with the prov miliar with ar merely to refle	visions of all stand accept the object a change in t ag of this change	nd agree to act in tutes relative to the ligation of mv pos he registered office e.	he proper ai	nd comple	ete perfo gent. O confirm	ormance r if this that the
By: X	vee (	-Kubi,	,	06/08/2021				
	nature of Re	gistered Agent		•	Date			
If signing on be	half of a	n entity:						
Grace E. Kirby,	Asst. Vic	e President						
T	yped or Prir	ited Name						

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