F22000003981

·	(Requestor's Name)
	(Address)
<u> </u>	(Àddress)
	, · · · · · · · · · · · · · · · · · · ·
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
- 	(Business Entity Name)
	(Document Number)
	,
O arrado de la constante	Continuo de Status
Centiled Copies	Certificates of Status
Special Instructions to	Filing Officer:
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	AP

Office Use Only



800396236598

RA & RO Charge

2022 OCT 25 AM 9: 05

2022 **&**ST 25 AH 10: 31

A. RAMSEY 0CT 2 6 2022

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

ACCOUNT NO. : 12000000195		
REFERENCE : 074753 7539619		
AUTHORIZATION: Comboleron		
COST LIMIT : \$ 35.00		
ORDER DATE : October 24, 2022		
ORDER TIME : 9:14 AM		
ORDER NO. : 074753-005		
CUSTOMER NO: 7539619		
CHANGE OF AGENT		
NAME: THE OSCAR W. LARSON COMPANY		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
CERTIFIED COPY XX PLAIN STAMPED COPY		
CONTACT PERSON: Alexxis Weiland		

EXAMINER'S INITIALS:

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

statement of cha	ange is submitted for a corpora	2, 617.0502, 607.1508, or 617.1508, Florida Statutes, this tion organized under the laws of the State of MI erregistered agent, or both, in the State of Florida.
	the corporation; The Oscar W.	
	office address: 10100 Dixie Hi	
3. The mailing a	address (if different):	
4. Date of incorporation/qualification: 06/15/1959		959 Document number: F22000003981
5. The name and		egistered agent and registered office on file with the
	C T CORPORATION SYSTE	ЕМ
	1200 SOUTH PINE ISLAND	ROAD
	PLANTATION, FL 33324	
6. The name and (if changed):	•	ROAD Stered agent (if changed) and /or registered office NY
	Corporation Service Compar	<u>S</u>
	1201 Hays Street	
	Tallahassee	P.O. Box NOT acceptable FL 32301
_	ess of its registered office and be identical.	the street address of the business office of its registered agent,
Such change wa	is authorized by resolution dulie board, or the corporation ha	y adopted by its board of directors or by an officer so s been notified in writing of the change.
1/1/40	Jolle	Mike Borellis, Secretary
I hereby accept I further agree t of my duties, and document is bein corporation has	veen noujieu in writing of int	Printed or typed name and title agent and agree to act in this capacity, of all statutes relative to the proper and complete performance of the obligation of my position as registered agent. Or, if this inge in the registered office address, I hereby confirm that the s change.
av. Eyle		10/25/2022
Sign	Amediant Vice Prophent lature of Registered Agent	Date
f signing on bel	nalf of an entity:	
Ту	ped 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 * * *