

F22000003981

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

(Document Number)

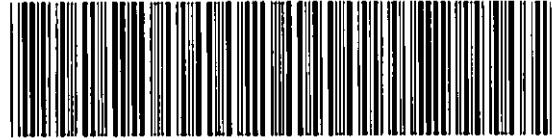
Certified Copies _____

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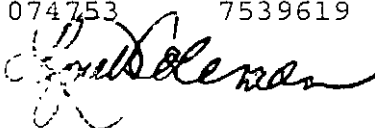
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A. RAMSEY

OCT 26 2022

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

ACCOUNT NO. : I20000000195
REFERENCE : 074753 7539619
AUTHORIZATION : 
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

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 MI in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: The Oscar W. Larson Company
- 2. The principal office address: 10100 Dixie Highway, Clarkston, MI 48348
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 06/15/1959 Document number: F22000003981
- 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)

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company
1201 Hays Street
 P.O. Box NOT acceptable
Tallahassee FL 32301

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 TALLAHASSEE, FLORIDA
 STATE DEPARTMENT OF REVENUE


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.


 Signature of an officer or director

Mike Borellis, Secretary
 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 Company
 By: 
 Assistant Vice President
 Signature of Registered Agent

10/25/2022
 Date

If signing on behalf of an entity:

 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