F96 000 000 392

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Canada Instructions to	5::: O#:	
Special Instructions to	Filing Officer:	ļ
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Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: February 8, 2021

Order#: 646236-072

Re: PROGRESS RAIL SERVICES CORPORATION

Enclosed please find:

XX Change of Registered Agent and Office.

 \overline{XX} Check in the amount of \$35.

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: Erika Zavala Daza 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.

QUCA.XCOA

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

statement of cha	mge is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida Statutes, this n organized under the laws of the State of AL registered agent, or both, in the State of Florida.	_
1. The name of t	the corporation: PROGRESS RAI	L SERVICES CORPORATION	
		S DR, ALBERTVILLE, AL 35950	_
3. The mailing a	address (if different): P.O. BOX 10	037 ATTN: LEGAL, ALBERTVILLE, AL 35950	_
		6 Document number: F96000000392	
	I street address of the current registement of State: (If resigned, enter	stered agent and registered office on file with the resigned)	
	CT CORPORATION SYSTEM		
	1200 S PINE ISLAND ROAD	FL 33324	**
	PLANTATION	FL 33324	G-1
6. The name and (if changed):	d street address of the new register Corporation Service Company	red agent (if changed) and /or registered of FATE	
	1201 Hays Street		
		P.O Box NOT acceptable	
	Tallahassee	FL 32301	
The street addre as changed will	ess of its registered office and the be identical.	e street address of the business office of its registered age	nt.
Such change wa authorized by th	as authorized by resolution duly a ne board, or the corporation has b	adopted by its board of directors or by an officer so been notified in writing of the change.	
Signarure of an officer of director		Jill Cilmi, Vice President	
		Printed or typed name and title	Printed or typed name and title
l further agrée (of my duties, an document is bei corporation has	the appointment as registered as to comply with the provisions of a lam familiar with and accept a glied merely to reflect a change been notified in writing of this a Service Company	gent and agree to act in this capacity. all statutes relative to the proper and complete performa the obligation of my position as registered agent. Or, if t ge in the registered office address, I hereby confirm that t change.	ice his he
•	nature of Registered Agent	02/04/2021	
Sig	nature of Registered Agent	Date	_
If signing on be	half of an entity:		
	Asst. Vice President	_	
L	yped or Printed Name	NG FEE: \$35.00 * * *	
	L I L I	はくきょうだい ゆうかいし	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)