

6777133

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

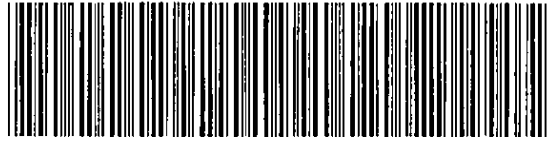
(Business Entity Name)

(Document Number)

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STATE OF FLORIDA
TALLAHASSEE, FL

2023 JUN 20 PM 3:14

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The North County Company, Inc.
Name of Corporation

DOCUMENT NUMBER: G77133

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:

William J. Maguire

Name of Contact Person

Maguire | Miller

Firm/Company

400 Columbia Drive, Suite 100

Address

West Palm Beach, FL 33409

City/State and Zip Code

william@maguire-law.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William J. Maguire

Name of Contact Person

at (561)

687-8100

Area Code & Daytime Telephone Number

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

Street Address:

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

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SECRETARY OF STATE
TALLAHASSEE, FL

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

1. The name of the corporation: The North County Company, Inc.
2. The principal office address: 8 Battis Road, Merrimac, MA 01860
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/03/1984 Document number: G77133
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)

Resigned/deceased

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

Maguire Law Chartered

400 Columbia Drive, Suite 100

P.O. Box NOT acceptable

West Palm Beach, FL 33409

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.

DocuSigned by:

Richard A. L'Abbe

Signature of an officer or director

Richard A. L'Abbe, President, VP, Secretary and Director

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.

William J. Maguire
Signature of Registered Agent

08/30/2023
Date

It signing on behalf of an entity:

William J. Maguire

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
CR2E045 (04/13)

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TALLAHASSEE, FL