2/20/24, 10:14 AM

Florida Department-of Sta

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000068362 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : BUSINESS FILINGS

Account Number : 105256001620

Phone : (608)827-5300 : (608)827-5501

Fax Number

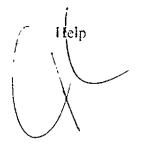
\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:\_\_nbarker@renderotrust.com

## REGISTERED AGENT CHANGE CMC CITRUS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing Menu



## 11240000683623

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

Pursuant to the provisions of sections 607.0502, 617, statement of change is submitted for a corporation of	rganized under the laws of the State of Florida	
m order to change its registered office or re	·	
1. The name of the corporation:		
2. The principal office address: 2550 Goodlette Rd.	N., Napies, Florida 34103	
3. The mailing address (if different): 3665 East Bay	Drive Suite 204 MB 435, Largo, FL 33771	
	Document number:170236	_
5. The name and street address of the current register Florida Department of State: (If resigned, enter tes	red agent and registered office on file with the signed)	•
Drumm, Thomas 3.		202
999 Vanderbilt Beach Rd. #507	TÄLL	2024 FEB 20
N. J. Pl. 24162		20
6. The name and street address of the new registered (if changed):	<u>or</u>	AM 9: 0
Business Filings Incorporated	— — — — — — — — — — — — — — — — — — —	0
1200 South Pine Island Road	( )	
P.C	O Boy NOI acceptable	
Plantation, Florida 33324		
The street address of its registered office and the stras changed will be identical.	reet address of the business office of its registered agent.	
Such change was authorized by resolution duly add authorized by the board, or the corporation has been	opted by its bould of directors or by an officer so a notified in writing of the change.	
	William Thomas, Vice President	
Signature of an officer or director	Printed or typed name and fille	
I hereby accept the appointment as registered agen I further agree to comply with the provisions of all of my duties, and I am familiar with and accept the document is being filed merely to reflect a change i corporation has been notified in writing of this cha	nt and agree to act in this capacity. stanties relative to the proper and complete performance abligation of my position as registered agent. Or, if this in the registered office address, I hereby confirm that the nge.	2 
(A)=30	5th day of February, 2024	
Signature of Registered Agent	Date	
If signing on behalf of an entity:		
Chris Das, AVP		
Typed or Printed Name		
* * * FILING	G FEE: \$35.00 * * *	
	FLORIDA DEPARTMENT OF STATE is, P.O. Don 6327, Tallahassee, FL 32314	