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(Requestor's Name)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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Office Use Only



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CLAS Information Services 2020 Hurley Way, Suite #350 Sacramento CA 95825 Tel: (800) 447-6237

Job Number: 419404–6671 Date: 8/25/2021

Name: IMAGINE RESEARCH OF PALM BEACH COUNTY, LLC

Request For: Florida

TYPE OF FILING: Change of Agent

Special Instructions:

Please file the attached upon receipt. We have enclosed check #95652 in the amount of \$25.00. Please call with any questions. Thank you in advance for your assistance.

Sincerely,

Judy Culver

Florida Department of State Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605,0114 or 605,0116. Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of

1. 8	same of the limited liability company: IMAGINE	RESEAR	CH OF PA	LM BEACH COUN	1TY, LL	_C	
2. (a)	Principal office address of limited liability company: Was MUCT BY STREET AND ATTERIOR OF A DESCRIPTION OF						
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited fiability company:			
	700 CONTUEEDEDAL MICHAMANA COTA			(<u>Note: MAY BE POST OFFICE BOX</u>) N BAY ROAD			
	BOYNTON BEACH, FL 33435			EACH, FL 33140			
	06/23/2021 L210			00299004			
3.	Date of filing/registration in Florida HERMAN, JUDITH	4.		Document number			
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:						
	Registered Office Address (MUST BE FLORIDA STRI 4550 N BAY ROAD	EET ADDRES.	<u>27</u>		2022 NHG 30		
	МІАМІ ВЕАСН	. FL 33140	 	•	30	- J	
	NRALSERVICES INC	-	······	<u>.</u>	Pi		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :				1:37	\G_2	
	NEW Registered Office Address						
	1200 SOUTH PINE ISLAND ROAD						
	PLANTATION	FL_33324					
the ch agent was/w	limited liability company is not organized under the ange or changes are made, the Florida street addrewill be identical. Or, in the case of a Florida limit ere authorized by an affirmative vote of the membicles of organization or the operating agreement of	ss of the regi ed liability c ers of the lin	istered office ompany, it is nited liability	and the business offices hereby contirmed the company or as other	ce of the	registered angets)	
	July Alman	Jud	udith Herman, Manager				

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.

Signature of Kegadered Agent CHRISTOPHER CHEUNG, ASSISTANT SECRETARY