

M0600000 1743

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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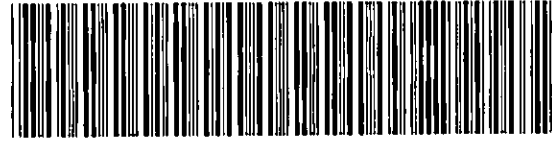
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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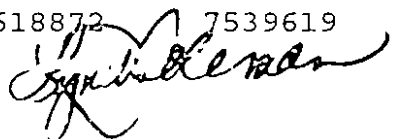
FILED
2023 MAR 29 AM 10:07
CLERK OF STATE
TALLAHASSEE, FL

RECEIVED
2023 MAR 29 PM 3:54
ALLAHASSEE, FL

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

ACCOUNT NO. : I20000000195

REFERENCE : 618872 7539619

AUTHORIZATION : 

COST LIMIT : \$ 25.00

ORDER DATE : March 28, 2023

ORDER TIME : 2:01 PM

ORDER NO. : 618872-040

CUSTOMER NO: 7539619

CHANGE OF AGENT

NAME: CROMPCO, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX ____ PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS: _____

**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 Florida.

1. Name of the limited liability company: Crompco, LLC
2. (a) 1815 Gallagher Road
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
Plymouth Meeting, PA 19462
- (b) 1815 Gallagher Road
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
Plymouth Meeting, PA 19462
3. 03/24/2006 Date of filing/registration in Florida
4. M06000001743 Document number
5. (a) COGENCY GLOBAL INC.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
115 North Calhoun Street Suite 4
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
Tallahassee, FL 32301
- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
Corporation Service Company
NEW Registered Office Address:
1201 Hays Street
Tallahassee, FL 32301

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

/s/ Michael Borellis

Michael Borellis

Signature of a member or authorized representative of a member

Printed or typed name of signee

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, I hereby confirm that the limited liability company has been notified in writing of this change.

Eylina Borellis
Assistant Vice President

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00