

M07 00000 2320

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

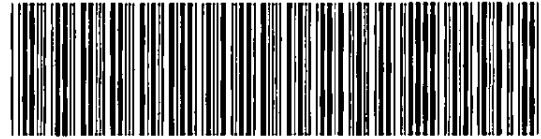
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

J. HORNE  
APR 10 2025

Office Use Only



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FILED  
2025 APR -9 AM 11:16

RECEIVED  
2025 APR -9 PM 3:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CT CORP**  
**(850) 656- 4724**  
**3458 lakesore Drive**  
**Tallahassee, FL 32312**

**Date:** 04/09/2025

Acc#I20160000072

*en: c DW*

Name:	Vestis Services, LLC
Document #:	
Order #:	16249821

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>	Email Address for Annual Report Notifications: <div></div>
	Plain: <input type="checkbox"/>	
	COGS: <input type="checkbox"/>	

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ **55.00**

Thank you!

## COVER LETTER

TO: Registration Section  
Division of Corporations

**SUBJECT:** Vestis Services, LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

## Business Compliance

Name of Person

Vestis Services, LLC

Firm/Company

2680 Palumbo Drive

Address

Lexington, KY 40509

City/State and Zip Code

Business\_Compliance@Vestis.com

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

For further information concerning this matter, please call:

\_\_\_\_\_  
Name of Person

at (\_\_\_\_\_) \_\_\_\_\_  
Area Code & Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

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

**Enclosed is a check for the following amount:**

☐ \$25 Filing Fee      ☐ \$30 Filing Fee & Certificate of Status      ☐ \$55 Filing Fee & Certified Copy      ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E055 (9/15)

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT  
BUSINESS IN FLORIDA**

**SECTION I (1-4 must be completed)**

1. Name of limited liability Company as it appears on the records of the Florida Department of  
State: Vestis Services, LLC

Enter new principal office address, if applicable: 1035 Alpharetta St., Suite 2100

(Principal office address  
MUST BE A STREET ADDRESS)

Attn.: Business Compliance

Roswell, GA 30075

Enter new mailing address, if applicable:

(Mailing address

MAY BE A POST OFFICE BOX)

2680 Palumbo Drive

Attn.: Business Compliance

Lexington, KY 40509

2. The Florida document number of this limited liability company is: M07000002326

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 04/23/2007

**SECTION II (5-9 complete only the applicable changes)**

5. New name of the limited liability company: \_\_\_\_\_  
(must contain "Limited Liability Company," "L.L.C." or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "L.L.C.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

*Enter Florida Street Address*

\_\_\_\_\_, Florida \_\_\_\_\_  
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

*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.*

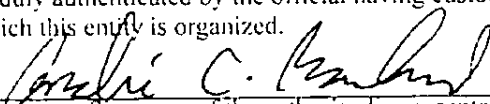
\_\_\_\_\_  
If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:  
See Attached Exhibit

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

  
\_\_\_\_\_  
Signature of the authorized representative

André C. Bouchard

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**

Exhibit to Section 8

Vice President Remove	ED FRIEDLER	115 NORTH FIRST STREET, BURBANK, CA 91502
Secretary Remove	ED FRIEDLER	115 NORTH FIRST STREET, BURBANK, CA 91502
Executive Vice President Add	André C. Bouchard	1035 Alpharetta St., Suite 2100, Roswell, GA 30075
Secretary Add	André C. Bouchard	1035 Alpharetta St., Suite 2100, Roswell, GA 30075
President ROSWELL, GA 30076	KIM SCOTT Remove	500 COLONIAL CENTER PARKWAY SUITE 140
President Add	Kelly Janzen	1035 Alpharetta St., Suite 2100, Roswell, GA 30075
Managing Member ROSWELL, GA 30076	VESTIS GROUP, INC. Remove	500 COLONIAL CENTER PARKWAY SUITE 140
Managing Member	Vestis Uniforms and Workplace Supplies, Inc.	1035 Alpharetta St., Suite 2100, Roswell, GA 30075 Add