Florida Department of State Division of Corporations

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : UNITED AGENT GROUP INC.

Account Number : I20160000086 Phone : (561)508-5033 Fax Number : (561)694-1639

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LLC REGISTERED AGENT CHANGE ORKIN, LLC

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JUL 18 2022

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT: OR BOTH FOR LIMITED LIABILITY COMPANYS

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

i.	Na	me of the limited liability company: Orkin, LLC				
2.	(a)		_ (b)			
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ , , , -	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
		2170 Piedmont Road NE		2170 Piedmont Road NE		
		ATLANTA, GA 30324-4135	_	ATLANTA, GA 30324-4135		
		12/31/2009		M09000005124		
3.		Date of filing/registration in Florida	4.	Document number		
5.	(a)	THE PRENTICE-HALL CORPORATION S	SYSTEM, IN	<u>c.</u>		
	` ,	Registered Agent and Registered Office shown on the records of the				
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
		1201 HAYS STREET				
		TALLAHASSEE , FL	32301-252	2022 JUL 15		
	(L)	United Agent Group Inc.		. — — — — — — — — — — — — — — — — — — —		
	(0)	Enter pame of NEW Registered Agent and/or NEW Registered	Office address:			
				•• -		
		801 US Highway 1		<u> </u>		
		NEW Registered Office Address:		PH 12: 00		
		North Palm Beach, FL	33408			
cha age was the	nge nt w s/we anti	mited liability company is not organized under the law or changes are made, the Florida street address of the zill be identical. Or, in the case of a Florida limited lial reauthorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited liability.	registered office bility company f the limited list imited list im	te and the business office of the registered to it is hereby confirmed that the change(s) ability company or as otherwise provided in company. Pettine, Attorney-in-fact		
	_	was-of member or authorized representative of a member		Printed or typed name of signee		
pro the to i	visi obli nere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete parties of my position as registered agent as provided by reflect a change in the registered office address, I have it in writing of this change. Carol Pettine, Special Secretary	performance of for in Chapter ereby confirm	my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed		
Sig	na (i	e of Registered Agent	,			
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314						