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(Requestor's Name)						
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PICK-UP WAIT MAIL						
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195						
REFERENCE : 576738 8327280						
AUTHORIZATION: Synthetic man						
COST LIMIT : \$ 25.00						
ORDER DATE: March 13, 2023						
ORDER TIME : 1:24 PM						
ORDER NO. : 576738-009						
CUSTOMER NO: 8327280						
<u>CHANGE OF AGENT</u>						
NAME: ACCURATE PERSONNEL, LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY						
XX PLAIN STAMPED COPY						
CONTACT PERSON: Alexxis Weiland-sorenson						
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. Na	ame of the limited liability company: ACCURATE PE	RSON	۱E۱	., LLC		
2. (a)	33 S. ROSELLE ROAD		(b) 33 S. ROSELLE ROAD			
(/	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	SCHAUMBURG, IL 60193		-	SCHAU	IMBURG, IL 60193	
	08/09/2013	_	Μ	1130000	005026	
3.	• Date of filing/registration in Florida	4.			Document number	
5. (a)	·					
	Registered Agent and Registered Office shown on the records of INCORP SERVICES, INC.	the Floric	đa D	ept. of St	15.7	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				_	
	3458 LAKESHORE DRIVE					
	TALLAHASSEE , FL	32312			MOTION IN PHIZ: 21	
					SEE SALES	
(b)					- FA	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	<u>ddr</u>	ess:	·	
	Corporation Service Company					
	NEW Registered Office Address;					
	1201 Hays Street					
	Tallahassee	32301			_	
	FL.			_		
change agent v was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	register ability co of the lin	red om nite	office a pany, it ed liabil	ind the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in	
	Jill Cilmi, Author				norized Person	
Signature of a member or authorized representative of a member Printed or typed name of signee						
provisi the obl to mere	by accept the appointment as registered agent and agra ons of all statutes relative to the proper and complete igations of my position as registered agent as provided ly reflect a change in the registered office address, I had in writing of this change.	ee to ac perform I for in iereby c	t in tand Che tonj	this ca ce of m apter 60 irm tha	pacity. I further agree to comply with the valuties, and I am familiar with and accept 05, F.S. Or, if this document is being filed the limited liability company has been	
Signatu	re of Registered Agent					
-	E. Kirby, Asst. Vice President Division of Corporations • P.O. 1	3ox 632	:7●	Tallah	assee. FL 32314	

FILING FEE: \$25.00

INHS18 (2/14)