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(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:
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: October 23, 2020

Order#: 467043-023

Re: COOK & BOARDMAN LLC

Enclosed please find:

XX____ Change of Registered Agent and Office.

XX Check in the amount of \$25...

Please take the following action:

XX _ File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Erika Zavala Daza c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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.

	3064 SALEM INDUSTRIAL DRIVE		/1 -	3064 SA	ALEM INDUS	TRIAL DRIVE	
ı) _	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	WINSTON SALEM, NC 27127			WINSTO	ON SALEM, N	C 27127	
	12/18/2014		1	M1400000	09070		
	Date of filing/registration in Flor	ida	4.		Document n	number	
a)	NRAI SERVICES, INC						
	Registered Agent and Registered Office shown on	the records of the	Florida	Dept. of Sta	nte:		
	1200 SOUTH PINE ISLAND ROAD						
	Registered Office Address (MUST BE FLORI)	DA STREET ADI	DRESS	 !			
						202 SE	
	PLANTATION	, FL	3324	<u>.</u>	-	2020 OCT 27 SEGRETAR	
						27	
) .	Enter name of NEW Registered Agent and/or NE	W Designed Of	Ties ada		_	760 F	
	Enter name of NEW Registered Agent and/or NE	W RESISTERED OF	nce auc	<u>iress</u> .			
	Corporation Service Company					MIII 12	
	NEW Registered Office Address:					en e	
	1201 Hays Street				_		
	Tallahassee	, FL_32	2301				
					_		
: lii	mited liability company is not organized to or changes are made, the Florida street ad	inder the laws of	of the	State of Fl	lorida, it is he	reby confirmed that after	
ťw	rill be identical. Or, in the case of a Florid	la limited liabil	lity cor	npany, it	is hereby con	firmed that the change(s	
	re authorized by an affirmative vote of the cles of organization or the operating agree					or as otherwise provided	
					orized Persor	n	
nan	χία ε. Coui. ure of a member or authorized representative of a π	iember				oed name of signee	
	by accept the appointment as registered agons of all statutes relative to the proper an gations of my position as registered agently reflect a change in the registered office		to act forma or in C	in this cap nce of my hapter 60	pacity. I furth duties. and I 5. F.S. Or, if	ner agree to comply with am familiar with and ac this document is being	

Corporation Service Company Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18 (2/14)

Grace E. Kirby, Asst. Vice President of