

Florida Department of State
Division of Corporations
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To:

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

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC REGISTERED AGENT CHANGE
GEORGIA-PACIFIC BLEACHED BOARD LLC**

Certificate of Status	0
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Page Count	02
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JUL 23 2021

A. LUNT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
21 JUL 22 PM 12: 21

2021 JUL 22 AM 9:53

RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

GEORGIA-PACIFIC BLEACHED BOARD LLC

1. Name of the limited liability company: _____

133 Peachtree St NE, Atlanta, GA 30303

133 Peachtree St NE, Atlanta, GA 30303

2. (a) _____

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

(b) _____

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

12/09/2015

M15000009855

3. Date of filing/registration in Florida

4. _____

Document number

C T CORPORATION SYSTEM

5. (a) _____

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1200 SOUTH PINE ISLAND ROAD

Registered Office Address (**MUST BE FLORIDA STREET ADDRESS**)

PLANTATION

33324

FL

UNITED AGENT GROUP INC.

(b) _____

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

801 US HIGHWAY 1

NEW Registered Office Address:

NORTH PALM BEACH

33408

FL

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.

Adia Myles, Attorney-in-fact

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.

Adia Myles, Special Secretary

Signature of Registered Agent

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

FILING FEE: \$25.00

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