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D	ate:	11/09/2023	_
		Acc#I20160000072	- 4: DW
Name:	The Cook 8	& Boardman Group, L	LC
Document #:		·	
Order #:	15213170		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:			
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Thank you!

Ref#

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. N	ame of the limited liability company: THE COOK & B	BOARDM	AN GROUP		
2. (a)	3064 SALEM INDUSTRIAL DRIVE	(t	3064 SAL	SALEM INDUSTRIAL DRIVE	
. ,	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		WINSTON	N SALEM, NC 27127	
	12/05/2019		M19000011	590	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	CORPORATION SERVICE COMPANY				
J. (a	Registered Agent and Registered Office shown on the records of 1201 HAYS STREET	the Florida	a Dept. of Stat	- e:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			7023 HOV	
	TALLAHASSEE , FI	32301	-	·	
da	C T Corporation System				
(b)	Enter name of NEW Registered Agent and/or NEW Registered	l Office ad	dress:	- - ယ္	
				(3 9	
	NEW Registered Office Address:			-	
	1200 South Pine Island Road			-	
	Plantation FI	33324		_	
the ch agent was/w the art	limited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the members of the street of the members of the operating agreement of the members of the members of the street of the members of the	f the reginability confithe limited l	stered office ompany, it is lited liability liability con	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in	
	iture of a member or authorized representative of a member			Printed or typed name of signee	
provis the ob to mer notifie 3y:	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I d'in writing of this change. C T Corporation System SEAN L. EMERICK, ASSISTANT SECRETARY THE OF Registered Agent	perform d for in (hereby c	t in this cap ance of my Chapter 603 onfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 FILING FEE: \$25.00