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CORPORATION SERVICE COMPANY 1201 Hays Street

CONTACT PERSON: Eyliena Baker

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE AUTHORIZATION COST LIMIT : \$ 25.00 ORDER DATE: August 10, 2023 ORDER TIME : 1:59 PM ORDER NO. : 929679-075 CUSTOMER NO: 7848634 CHANGE OF AGENT WORLDWIDE SAFETY NAME: PROFESSIONALS, LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY ____ PLAIN STAMPED COPY

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: WORLDWIDE S	AFETY	PROF	FESSIONALS, LLC	
2. (a)	4805 West Prime Parkway	(1	4805	05 West Prime Parkway	
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(·/	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	McHenry, IL 60050	<u></u>	McH	Henry, IL 60050	
	04/28/2020	_	M200	000004062	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)					
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: BUSINESS FILINGS INCORPORATED				
	Registered Office Address (MUST BE FLORIDA STREET)				
	1200 South Pine Island Road				
	Plantation . FL	33324	_	2023 AUG Segreta Talla	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	CIARY OF STATE LAHASSEE, FL			
	NEW Registered Office Address:	,		FL :	
	1201 Hays Street				
	Tallahassee, FL	32301			
change agent v was/w	limited liability company is not organized under the law c 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 icles of organization or the operating agreement of the	registere bility co	ed offic impany nited lia	ice and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in	
				uthorized Person	
I here provisi the obli to mere notified	three of a member or authorized representative of a member by accept the appointment as registered agent and agree to so all statutes relative to the proper and complete pligations of my position as registered agent as provided ely reflect a change in the registered office address. I have a change in the registered office address. I have a change of this change.	perform I for in C vereby co	ance of Thapter Onfirm (Printed or typed name of signee s capacity. I further agree to comply with the of my duties, and I am familiar with and accep- or 605, F.S. Or, if this document is being filed that the limited liability company has been irby, Asst. Vice President	
notified	ligations of my position as registèred agent as provided ely reflect a change in the registered office address. I had in writing of this change.				