## Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 : (561)694-8107 Fax Number : (561)214-8442

\*\*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 PRIMESOURCE BUILDING PRODUCTS PROCUREMENT COMPANY, LLC

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FEB 2 2 2024

K. SALY

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## 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.

2. (a)		(	b)		
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			·	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	1321 GREENWAY DR			1321 GF	REENWAY DR
	IRVING, TX 75038	<del></del>	-	IRVING,	TX 75038
	11/01/2023		N	1230000	14012
3.	Date of filing/registration in Florida	4.			Document number
5. (a)					
	Registered Agent and Registered Office shown on the records of C T CORPORATION SYSTEM	the Florid	a I	ept, of Sta	ie:
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRES.	S)		_
	1200 SOUTH PINE ISLAND ROAD		_		
	PLANTATION. , FL	33324			PRZ4 FEB 22 PH
					AH -
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office ac	ddr	·ess:	FEB 22 PH
	Corporate Creations Network Inc.				1 3: 45 1 Loalo
	NEW Registered Office Address:				88° <b>5</b>
	801 US Highway 1				_
	North Palm Beach , FI.	33408			
change agent w was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill 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	ed om nite	office ar pany, it i ed liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
	Niyya Rice, Atte				
					Printed or typed name of signee
provision the oblination to mere	by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I I I in writing of this change.	ee to ac perform l for in ( iereby c	t ir an Ch on,	i this cap ce of my aptèr 60, firm that	pacity. 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

Nivya Rice, Special Secretary