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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803 Fax Number : (855)330-1010

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

Email Address:\_\_\_

## REGISTERED AGENT CHANGE WORLD SERVANTS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change	visions of sections 607.0502, 617.0502 is submitted for a corporation organi change its registered office or registe	ized under the laws of the State of $\_$	<del></del>
1. The name of the	corporation: World Servants, Inc.	_	
	ice address:		<del></del>
3. The mailing addr	ess (if different):		
4. Date of incorpora	ution/qualification: 06/17/86	Document number: N15462	
	eet address of the current registered agent of State: (If resigned, enter resigned	-	th the
ВІІ	LINGS, MARTHA		
<u>15</u>	76 CRESTVIEW AVE		
<u>TA</u>	LLAHASSEE, FL 32303-5816	<u> </u>	
6. The name and str (if changed):	eet address of the new registered agen	t (if changed) and for registered off	
<u>N</u>	orthwest Registered Agent	LLC	10:11:01
79	01 4th St N STE 300		
Sı	РО. Вох NOT: t. Petersburg FL 33702	acceptable	• • •
The street address of as changed will be	of its registered office and the street a identical.	address of the business office of its	registered agent,
Such change was a authorized by the b	uthorized by resolution duly adopted oard, or the corporation has been not	by its board of directors or by an o ified in writing of the change.	officer so
Kenneth Signature of	'Wright	Kenneth Wright, Director	
=	an once: a unecos  appointment as registered agent and omply with the provisions of all statu duties, and I am familiar with and ac ocument is being filed merely to refle the corporation has been notified in	21	
long	rlove	8/12/21	
Signatur	e of Registered Agent	Date	
If signing on behalf	or an entity:		
Tom Glover	or Printed Name		
	* * * FILING FEH	E: \$35.00 * * *	

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)