## N19000012718

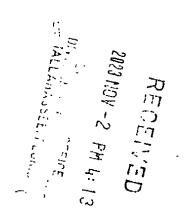
(Requestor's Name)	
(Address)	
V. 100. 2337,	
(Address)	
(ChalChan Tin Thomas III)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
(Socialization)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	: I2000000195	
	REFERENCE	$\mathcal{J} \setminus \mathcal{J}$	
	AUTHORIZATION	: Typellenan	
	COST LIMIT	: \$ 35.00	
ORDER DATE :	October 6, 2023		~ .
ORDER TIME :	1:58 PM		AGN 8202
ORDER NO. :	051775-001		θV −2
CUSTOMER NO:	7880484		2 PH 12:
	CHANGE OF A	GENT	0 4 5
NAME:	ACAMS NORTH AI	MERICA CHAPTERS,	
PLEASE RETURN	THE FOLLOWING AS	PROOF OF FILING:	
	TIED COPY STAMPED COPY		
CONTACT PERSON	: Eyliena Baker		
		EXAMINER:	

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

statement of ch	provisions of sections 607.05 ange is submitted for a corpor er to change its registered offi	ration organized under the lav	vs of the State of _	=
1. The name of	the corporation: ACAMS NOF	RTH AMERICA CHAPTERS,	INC.	
	l office address: 1321 Upland			
3. The mailing	address (if different):			
4. Date of incor	poration/qualification: 12/13/	/2019 Document r	number:N190000	112718
	d street address of the current artment of State: (If resigned, e		d office on file wit	h the
	FLORIDA FILING & SEAR	CH SERVICES INC.		
	155 OFFICE PLAZA DR.,	STE. A		
	TALLAHASSEE	FL	32301	2028
6. The name an (if changed):	d street address of the new reg	gistered agent (if changed) and	l /or registered offi	2023 HOV -2
	Corporation Service Comp	any	_	7
	1201 Hays Street			PH 12: 40
	01			
	Tallahassee	FL	32301	
The street addr as changed wil	ess of its registered office and I be identical.	d the street address of the bu	siness office of its	registered agent.
Such change wanthorized by	as authorized by resolution d he board, or the corporation l —bocusigned by:	luly adopted by its board of d has been notified in writing o	lirectors or by an of the change.	officer so
	7 00070 7112070	Nolan Aiken, Vi	ce President	
Signa	5D08D5ADD39B43B . :tor	Printe	ed or typed name and titl	e
I further agree of my duties, ar document is be corporation ha	t the appointment as registers to comply with the provision nd I am familiar with and acc ing filed merely to reflect a c is been notified in writing of t in Service Company	s of all statutes relative to the cept the obligation of my posi- hange in the registered office	this capacity. e proper and com ition as registered e address. I hereb	plete performance agent. Or, if this v confirm that the
By: Y	Total	11.	/02/2023	
-1. TUC	gnature of Registered Agent		Date	
If signing on be	chalf of an entity:			
Grace E. Kii	rby, Asst. Vice President			
	Voed or Printed Name	<del></del>		

\* \* \* FILING FEE: \$35.00 \* \* \*