P000112152

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Only/State/Zip// None #/
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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(9/23/2022

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195			
REFERENCE : 968006 8104386			
AUTHORIZATION : Sprelle le man			
COST LIMIT : '\$ 35.00.			
ORDER DATE : September 22, 2022			
ORDER TIME : 10:21 AM			
ORDER NO. : 968006-015			
CUSTOMER NO: 8104386			
CHANGE OF AGENT			
NAME: PLANSOURCE FINANCIAL SERVICES, INC.			
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:			
CERTIFIED COPY XX PLAIN STAMPED COPY			
CONTACT PERSON: Eyliena Baker EXT#			
EXAMINER:			

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

Pursuant to the provisions of sections 607,0502, 617 0 statement of change is submitted for a corporation org m order to change its registered office or regi	anized under the laws of the State of	i
1. The name of the corporation: PLANSOURCE FINA	NCIAL SERVICES, INC.	
1. The name of the corporation:	FNUE SUITE 203	
2. The principal office address: 101 S. GARLAND AVI		
3. The mailing address (if different):	. P00000112152	
4. Date of incorporation qualification: 12/07/2000	Document number:	
5 The name and street address of the current registere Florida Department of State: (If resigned, enter resigned)	ed agent and registered office on file with the gned)	2022 8 7
BARNARD, PATRICIA		<u> </u>
101 S. GARLAND AVENUE SUITE	203	22
ORLANDO	FL 32801	<u></u>
6. The name and street address of the new registered of (if changed): Corporation Service Company 1201 Hays Street	agent (if changed) and .or registered office.	4: 44
PC	Hox NOT a ceptable	
Tallahassee	FL 32301	
The street address of its registered office and the stras changed will be iten ival. Such change was subjunted to resolution duly add authorized by the domestic interportation has been authorized by the domestic interportation has been authorized by the appointment as registered agent further agree to comply with the provisions of all of my duties, and I am familiar with and accept the	opted by its board of directors or by an officer so in notified in writing of the change. Pa-V CA Barrard, CC Printed or typed name and time, It and agree to act in this capacity, statutes relative to the proper and complete per	formance Or, if this
document is being filed merely to reflect a change of corporation has been notified as writing of this change of corporation Service Company By: Note of Registered Agent If signing on behalf of an entity:	the trie of True or of Other consers and	1 mai me
Grace E. Kirby, Asst Vice President Typed or Printed Same	G FEE: \$35.00 * * *	
" " " PILLEN	ER B. GARAN TOMACOUNT	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR21045 (04/13)