P06000119234

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Office Use Only



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2022 NOV 30 PH 2: 54

RECEIVED 2022 NOV 30 AM II: 31

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

	ACCOUNT NO.	:	12000000195			
	REFERENCE	:	164676 7572690			
	AUTHORIZATION	:	Spelleran			
	COST LIMIT	:	\$ 35.00			
ORDER DATE : No	vember 29, 202	2				
ORDER TIME : 9						
ORDER NO. : 16	4676-005					
CUSTOMER NO:	7572690					
	- 					
CHANGE OF AGENT						
NAME :	MISSION SEARCH SERVICES, INC		DNTRACT			
PLEASE RETURN TH	É FOLLOWING AS	PRO	OOF OF FILING:			
CERTIFIE PLAIN ST						
CONTACT PERSON:	Alexxis Weilar	nd -	EXT#			

EXAMINER:

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

statement of cha	nge is submitted for a corporation	517.0502, 607.1508, or 617.1508, Florida S. n organized under the laws of the State of <u>F</u> r registered agent, or both, in the State of Fl	Florida
1. The name of t	he corporation: MISSION SEARC	CH CONTRACT SERVICES, INC.	
2. The principal	office address: 2203 N. Lois Ave,	Suite 1100 Tampa, FL 33607	
3. The mailing a	ddress (if different):		
4. Date of incorp	oration/qualification: 9/15/2006	Document number: P060001	19234
	street address of the current registment of State: (If resigned, enter	stered agent and registered office on file wit resigned)	h the
	DOMINICI, PETER		
	2303 N. LOIS AVE., #1100		
	Tampa	FL 33607	207
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or register		2022 NOV 30
	Corporation Service Company		
	1201 Hays Street		4 2:
		<u> </u>	
	Tallahassee	FL 32301	(T) **
The street addre as changed will	ss of its registered office and the be identical.	e street address of the business office of its	registered agent,
Such change wa authorized by th	s authorized by resolution duly a e board, or the corporation has b	adopted by its board of directors or by an open notified in writing of the change.	officer so
	m1	Mark Siegel	Vice President
Signatur	71 /	Printed or typed name and title	
I hereby accept a I further agree of of my duties, and document is bein corporation has Corporatior	the appointment as registered as comply with the provisions of a lam familiar with and accept to gilled merely to reflect a chang been notified in writing of this a Service Company	gent and agree to act in this capacity. all statutes relative to the proper and comp the obligation of my position as registered ge in the registered office address, I hereby change.	plete performance agent. Or, if this confirm that the
By: Oliver li	in the second of	11/30/2022	
Sign If signing on bel	olure of Registered Agent nalf of an entity:	Date	
			
Ту	ped or Printed Name		

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

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)