

PO6000141352

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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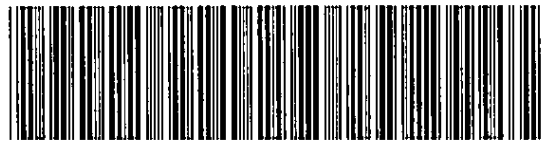
(Business Entity Name)

(Document Number)

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STATE OF MISSISSIPPI  
DEPT. OF REVENUE

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AUG 11 2021  
C. KIRBY

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Government Process Services, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P06000141352

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sandra MAKSYM  
Name of Contact Person

Government Process Services  
Firm/Company

375 Star Light Drive  
Address

Fort Mill SC 29715  
City/State and Zip Code

sandymaksym@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sandy MAKSYM at ( 561 ) 578-9033  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FL 607 in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Government Process Services Inc.
2. The principal office address: 6379 C Durham Dr  
Lake Worth, FL 33467
3. The mailing address (if different): 375 Star Light Drive, Fort Mill, SC 29715
4. Date of incorporation/qualification: 11/09/2006 Document number: P06000141352
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Sandra Maksym  
300 E Oakland Park Blvd #347  
Oakland Park, FL 33334

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Sandra Maksym  
6379 C Durham Drive  
P.O. Box NOT acceptable  
Lake Worth FL 33467

SECRETARY OF STATE  
TALLAHASSEE, FL

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Sandra Maksym  
Signature of an officer or director

Sandra Maksym, President  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

Sandra Maksym  
Signature of Registered Agent

7/20/2021  
Date

If signing on behalf of an entity:

Sandra Maksym  
Typed or Printed Name

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