P09000084310

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A. RAMSEY MAR 2 9 2023 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 604332 8011047

AUTHORIZATION :

COST LIMIT : \$\(\delta\)5.00

ORDER DATE: March 22, 2023

ORDER TIME : 1:50 PM

ORDER NO. : 604332-042

CUSTOMER NO: 8011047

CHANGE OF AGENT

NAME: MARK & KAMBOUR HOLDINGS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER:

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

	the corporation: MARK & KAME	or registered agent, or both, in the State of Florida. BOUR HOLDINGS, INC
2. The principal	office address: 11025 RCA CE	NTER DRIVE, SUITE 300 PALM BEACH GARDENS, FL 33410
3. The mailing a	nddress (if different):	
4. Date of incorp	poration/qualification: 10/12/2	009 Document number: P09000084310
	d street address of the current re rtment of State: (If resigned, ent	gistered agent and registered office on file with the er resigned)
	REGISTERED AGENT SOL	UTIONS, INC.
	155 OFFICE PLAZA DR. SU	ITE A
	TALLAHASSEE	FL 32301
6. The name and (if changed):	d street address of the new regis	FL 32301 tered agent (if changed) and /or registered office
	Corporation Service Compan	y To to
	1201 Hays Street	The state of the s
		P.O. Box NOT acceptable
	Tallahassee	FL 32301
The street address changed will	ess of its registered office and t be identical.	the street address of the business office of its registered agent,
Such change wa	as authorized by resolution dul	y adopted by its board of directors or by an officer so s been notified in writing of the change.
· (2 00	JILL CILMI, VICE PRESIDENT
Signate	re of an officer or director	Printed or typed name and title
I further agrée l of my duties, an document is bei corporation has	The appointment as registered to comply with the provisions of all I am familiar with and acceping filed merely to reflect a chast been notified in writing of this Service Company	agent and agree to act in this capacity. of all statutes relative to the proper and complete performance of the obligation of my position as registered agent. Or, if this inge in the registered office address, I hereby confirm that the s change.
	mature of Registered Agent	03/28/2023
	`	Date
	half of an entity:	
GRAUE E KIRE	BY, ASST. VICE PRESIDENT	

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

Typed or Printed Name