P1000015138

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2023 OCT 12 AMII: 18

SECRETARY OF STATE

THE THE 5

A. RAMSEYOCT 13, 2023

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT	NO.	:	I20000000195
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REFERENCE : 057134 8428270

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE: October 9, 2023

ORDER TIME : 8:19 AM

ORDER NO. : 057134-024

CUSTOMER NO: 8428270

CHANGE OF AGENT

NAME: INTERPLEX SUNBELT 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

statement of cha	nge is submitted for a corporation	517.0502, 607.1508, or 617.1508, Florida Sta in organized under the laws of the State of Fl	orida		
	r to change its registered office of he corporation: INTERPLEX SU	r registered agent, or both, in the State of Floo INBELT HOLDINGS, INC.	rida.		
2. The principal	office address: 231 Ferris Avenue	e, Rumford, RI 02916			
	ddress (if different):				
4. Date of incorp	4. Date of incorporation/qualification: 02/19/2010 Document number: P10000				
	street address of the current regis tment of State: (If resigned, enter	stered agent and registered office on file with resigned)	the		
	Incorporating Services, Ltd.		0.7		
	1540 Glenway Drive		2023 OCT 12		
	Tallahassee	FL 32301	CT L		
6. The name and (if changed):	street address of the new register	ed agent (if changed) and /or registered office	2 PM 12 257 February 257 February		
	Corporation Service Company		925 U		
	1201 Hays Street				
		P.O. Box NOT acceptable			
	Tallahassee	FL 32301			
		street address of the business office of its re			
Such change wa author zed by th	s authorized by resolution duly a e board, or the corporation has b	adopted by its board of directors or by an off seen notified in writing of the change.	icer so		
Xiel	. E aoni	Jill Cilmi, Vice President	_		
/ ř	e of an officer or director	Printed or typed name and title			
I further agree to of my duties, and document is bein corporation has	a annual could the preparetone of a	gent and agree to act in this capacity. all statutes relative to the proper and comple the obligation of my position as registered a to in the registered office address, I hereby of thange.	ete performance gent. Or, if this confirm that the		
By:	, M Lei	10/12/2023			
	nature of Registered Agent	Date			
If signing on bel	nalf of an entity:				
Ami M. Casper,	Asst. Vice President	_			
Ty	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)