(R)	equestor's Name)	
	ddress)	
15-14	361 6 33)	
(Ai	ddress)	
(C)	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	-	
(Bi	usiness Entity Name)	
(D	ocument Number)	
Copies	Certificates o	of Status
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astructions to Fili	ng Officer.	
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Office Use Only



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2023 HAY - 1 PH C: 0 -

CORPORATION SERVICE COMPANY
1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT N	Ю.	: I	200	00	00	01	95
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REFERENCE : 582393 8406137

AUTHORIZATION :1/

COST LIMIT : U\$ 35.00

ORDER DATE: March 14, 2023

ORDER TIME : 1:49 PM

ORDER NO. : 582393-031

CUSTOMER NO: 8406137

CHANGE OF AGENT

NAME: LIVING FOR EXCELLENCE CANADA CORPORATION

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	17.0502, 607.1508, or 617.1508, Florida Statutes 1 organized under the laws of the State of 1 registered agent, or both, in the State of Florida.	. this
		CELLENCE CANADA CORPORATION	
		ID ROAD PORT ST.LUCIE, FL 34984	
3. The mailing a	address (if different): 200 Commor	n Wealth Court Cary, NC 27511	
		Document number: P11000042074	<u> </u>
	d street address of the current regis timent of State: (If resigned, enter	stered agent and registered office on file with the resigned)	2
	Woodward, Orrin		0231
	1200 South Pine Island Road		2023 MÅY
	Plantation	FL 33324	- - -
6. The name and (if changed):	d street address of the new register	ed agent (if changed) and /or registered office	PM () ()
	Corporation Service Company		
	1201 Hays Street		
		P.O. Box NOT acceptable	
	Tallahassee	FL 32301	
		street address of the business office of its registed	
authorized by th	ne board, or the corporation has b	dopted by its board of directors or by an officer een notified in writing of the change.	30
لع 💉 🔃	e E. Gone	Jill Cilmi; Vice President	
I hereby accept I further agree to of my duties, an document is bein corporation has	the appointment as registered ag to comply with the provisions of a d I am familiar with and accept to my filed merely to reflect a chang been notified in writing of this con Service Company	Printed of typed name and title sent and agree to act in this capacity, all statutes relative to the proper and complete p the obligation of my position as registered agent, the in the registered office address. I hereby confi- thange.	erformance Or, if this rm that the
By: Y)	an Y-Kubi	05/01/2023	
_	half of an entity:	Date	
	Asst. Vice President		

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