## P12000079910

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PICK-UP WAIT MAIL				
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O SIMMONS FEB 2 8 2012 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195			
REFERENCE : 451817 7954329			
AUTHORIZATION :			
COST LIMIT : 35.00			
ORDER DATE : February 1, 2022			
ORDER TIME : 5:23 PM			
ORDER NO. : 451817-042			
CUSTOMER NO: 7954329			
CHANGE OF AGENT			
NAME: SEI CONSULTING SERVICES, INC.			
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:			
CERTIFIED COPY			
XX PLAIN STAMPED COPY			
CONTACT PERSON: Eyliena Baker EXT#			
CONTACT PERSON: Eyliena Baker EXT#			

EXAMINER: \_\_\_\_\_

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

statement of char	ige is submitted for a corporation org	2502, 607.1508, or 617.1508. Florida Statutes, this ganized under the laws of the State of FLORIDA		
<del></del>		istered agent, or both, in the State of Florida.		
1. The name of the	ne corporation: SEI CONSULTING SE	ERVICES, INC		
	office address: DRIVE SUITE 3100 TAMPA, FL 33			
4. Date of incorp	oration/qualification: 09/20/2012	Document number: P12000079910		
	street address of the current registere tment of State: (If resigned, enter resigned)	d agent and registered office on file with the gned)		
	PARACORP INCORPORATED			
	155 OFFICE PLAZA DRIVE 1ST FLOOR			
	TALLAHASSEE	FL 32301		
6. The name and (if changed):		gent (if changed) and /or registered office		
	Corporation Service Company			
1201 Hays Street				
	r.o. Tallahassee	Box NOT acceptable FL 32301		
	ess of its registered office and the street be identical.	eet address of the business office of its registered agent		
Such change was authorized by the	is authorized by resolution duly adoptive board, or the corporation has been	nted by its board of directors or by an officer so notified in writing of the change.		
Xie	2. agni	Jill Cilmi, Vice President		
/ [	re of an officer or director	Printed or typed name and title		
I further agree to of my duties, an document is being corporation has	the appointment as registered agent to comply with the provisions of all s d I am familiar with and accept the englied merely to reflect a change in been notified in writing of this change in Service Company	tatutes relative to the proper and complete performand obligation of my position as registered agent. Or, if th on the registered office address, I hereby confirm that th		
Ву: Д	are tokuble	02/24/2022		
	half of an entity:	Date		
	Asst. Vice President			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)

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