P150000 75239

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Premium Supplier Inc.		
Name of Corporation		
DOCUMENT NUMBER: P15000075239		
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:		
Mark D. Nichols		
Name of Contact Person		
Premium Supplier Inc.		
Firm/Company		
2121 Vista Parkway		
Address		
West Palm Beach, FL 33411		
City/State and Zip Code		
mnichols@ufgcorp.com		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Mark D. Nichols Name of Contact Person Name of Contact Person Name of Contact Person Name of Contact Person Area Code & Daytime Telephone Number		
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 Clifton Building 2661 Executive Center Circle		
Tallahassee, FL 32314 2661 Executive Center Circle		

Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida rochange its registered office or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: Premium Supplier Inc.	
2. The principal office address: 2121 Vista Parkway, West Palm Beach, FL 33411		
3. The mailing a	ddress (if different): Same	
4. Date of incor	poration/qualification: 09/16/2015 Document number: P15000075239	
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)	
	Jill K. Klein (changed)	
	2121 Vista Parkway	
	West Palm Beach, FI 33411	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
	Mark D. Nichols	
	2121 Vista Parkway	
	P.O. Box NOT acceptable West Palm Beach, FI 33411	
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.	
Such change wa	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
Ko	White Ray Titus, Director	
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address. I that the corporation has been notified in writing of this change. Date	
If signing on be	half of an entity:	
Т	yped or Printed Name	

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