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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : COMPUTERSHARE Account Number: 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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REGISTERED AGENT CHANGE SECUR-ALL AGENCY INC

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Corporate Filing Menu

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

	•	617.0502, 607.1508, or 617.1508, Florida Statutes, th on organized under the laws of the State of <mark>Flo</mark> rida	uis
in ord	er to change its registered office o	r registered agent, or both, in the State of Florida.	
1. The name of	the corporation: Secur-All Agency	y, Inc.	
2. The principa LONGBOAT K	office address: 6350 Gulf of Mexi	co Drive	_
3. The mailing	address (if different):		
4. Date of incorporation/qualification: 04/20/2016 Document number: P16000035952			
	d street address of the current regi rtment of State: (If resigned, enter	istered agent and registered office on file with the resigned)	
	Smith, SANDRA		
	6350 Gulf of Mexico Drive		
	LONGBOAT KEY, FL 34228		20%
6. The name an (if changed):	d street address of the new registe	red agent (if changed) and /or registered office	21)
	Corporate Creations Network Inc.		
	801 US Highway 1		 دن
	N. J. D. J. D. J. 22400	P.O. Box NOT acceptable	30
	North Palm Beach, FL 33408		
The street address changed will	ess of its registered office and the lbe identical.	e street address of the business office of its registered	d agent,
Such change wauthorized by t	as authorized by resolution duly he board, or the corporation has l	adopted by its board of directors or by an officer so been notified in writing of the change.	
Jymber	djutajs	Tymberlyn Teefey, Attorney-in-Fact	
Signatu	ire of an officer or director	Printed or typed name and title	
I further agree of my duties, ar document is bei	the appointment as registered a to comply with the provisions of ad I am familiar with and accept ing filed merely to reflect a chan s been notified in writing of this i	gent and agree to act in this capacity. all statutes relative to the proper and complete perfo the obligation of my position as registered agent. O ge in the registered office address, I hereby confirm change.	ormance or if this that the
	Theroght Jakh	07/20/2023	
Sig	mature of Registered Agent	Date	
If signing on be	chalf of an entity:		
Tymberlyn Teel	ey, Special Secretary	_	
1	yped or Printed Name	_	

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