## P39775

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

statement of char	provisions of sections 607.0502, 617.050 nge is submitted for a corporation organ r to change its registered office or registe	ized under the law	s of the State o	of GA	
1. The name of t	he corporation: CEN-SIGNAL SSC SER	VICES, INC.			
2. The principal	office address: D/B/A CENTRAL SIGNA	LING 2033 HAMII	LTON ROAD (	COLUMBUS, GA 31904	
————— 3. The mailing ac	ddress (if different):				
4. Date of incorp	oration/qualitication: 07/24/1992	Document n	umber: <u>P39</u> 7	75	
	street address of the current registered a tment of State: (If resigned, enter resigne		d office on file	with the	
	CT CORPORATION SYSTEM/ CHRIS	STINE KELM			
	1200 SOUTH PINE ISLAND ROAD				
	PLANTATION	FL	33324	2024 2500 2500 2500 2500 2500 2500 2500	
6. The name and (if changed):	PLANTATION  FL 33324  STEP 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	Corporation Service Company				
	1201 Hays Street				
	P.O. Box NOT acceptable				
	Tallahassee	FL	32301		
The street addre as changed will	ss of its registered office and the street be identical.	address of the bus	siness office o	f its registered agent,	
Such change wa authorized by th	s authorized by resolution duly adopted e board, or the corporation has been no	l by its board of d titled in writing o	irectors or by a fithe change.	an officer so	
/s/ Jeffery W. I	Bennett	Jeffery W. Benn	ett	Chief Operating Officer	
Signatur	e of an officer or director	Printe	d or typed name an	diffe	
l further agrée t of my duties, and document is beit corporation has	the appointment as registered agent am o comply with the provisions of all state of I am familiar with and accept the obli- ng filed merely to reflect a change in the been notified in writing of this change. n Service Company	utes relative to the igation of my posi e registered office	his capacity, e proper and c tion us registe e address, I he	complete performance gred agent. Or, if this reby confirm that the	
By: Ynge	nature of Registered Agent	10/15/2024  Date			
If signing on bel	half of an entity:				
GRACE E. KIRB	BY, ASST. VICE PRESIDENT				
Ту	ped or Primed Name				
	* * * FILING FE	E: \$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)