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## REGISTERED AGENT CHANGE ADDISON STRUCTURAL SERVICES, INC.

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S

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

statement of chi	ange is submitted for a corporation organ	2, 607.1508, or 617.1508, Florida Statutes ized under the laws of the State of <mark>FLORIE</mark> tred agent, or both, in the State of Florida.	DA
1. The name of	the corporation: ADDISON STRUCTURA	L SERVICES, INC.	
	office address: 3020 E CAMELBACK RD		
3. The mailing	address (if different): PO BOX 19028 PHO	ENIX, AZ 85005	
	poration/qualification: 05/12/1995		<u>.</u>
	d street address of the current registered a rtment of State: (If resigned, enter resigne	gent and registered office on file with the	
	C T CORPORATION SYSTEM		
	1200 SOUTH PINE ISLAND ROAD		
	PLANTATION, PL 33324		
6. The name and (if changed):	d street address of the new registered ager	nt (if changed) and /or registered office	2
	UNITED AGENT GROUP INC.	1×1	021 /
	801 US HIGHWAY 1		2021 AUG 26
	P.O. Box NORTH PALM BEACH, FL 33408	NOT acceptable	
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its regist	
Such change w authorized by	as authorized by resolution duly adopted be board of the corporation has been no	by its board of directors or by an officer tified in writing of the change.	so Cr
	W	Adia Myles, Attorney-in-fact	
- ;	re of an officer or director	Printed or typed name and title	
I hereby accept I further agree of my duties, ar document is be corporation ha	the appointment as registered agent and to comply with the provisions of all statud I will find accept the oblining fixed merely to reflect a change in this bedninoutied in writing of this change.	d agree to act in this capacity. ttes relative to the proper and complete p gation of my position as registered agent e registered office address, I hereby confi	erformance Or, if this irm that the
\	V / -	08/26/2021	
Sig	manue of Registered Agent	Date	
If signing on be	chalf of an entity:		
Adia Myles, Sp	ecial Secretary		
Т	yped or Printed Name		

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

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