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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: P.L. PROPERTIES (FLORIDA), INC.

Name of Corporation

DOCUMENT NUMBER: ____

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:

N. Dwayne Gray, Jr., Esquire

Name of Contact Person

Zimmerman, Kiser & Sutcliffe, P. A.

Firm/Company

315 E Robinson Street, Suite 600

Address

Orlando, Florida 32801

City/State and Zip Code

corporate@zkslawfirm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Barbie A. Blandina, Corporate Paralegal at 407 425-7010 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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

1. The name of the corporation: P.L. PROPERTIES (FLORIDA), INC

2. The principal office address: 245 EGLINTON AVENUE EAST, SUITE 400

TORONTO, ON M4P 397 CA

3. The mailing address (if different):

4. Date of incorporation/qualification: 05/23/1996 _____ Document number: P96000044808

The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

THE MARSTEL CORPORATION

2615 S UNIVERSITY DR

DAVIE, FL 33328

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

N. DWAYNE GRAY, JR., ESQUIRE

315 E ROBINSON ST., STE 600

P.O. Box NOT acceptable

ORLANDO, FL 32801

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the change authorized in writing of the change.

FRANK LAURIE, DIRECTOR

Printed or typed name and little -

Date

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

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Signature of Registered Agent

10/19/2020

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E015 (04/13)