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(((H24000068440 3)))



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nbarker@renderotrust.com

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## REGISTERED AGENT CHANGE COLLIER ENTERPRISES, INC.

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

statement of char	ige is snomitted	l for a corporation org	1502, 607, 1508, or 617, 1508, gantzed under the laws of the istered agent, or both, in the	State of Florida	a	-
	**	Collier Enterprises,	•	•		
2. The principal of	office address:_	2550 Goodlette Rd. N	., Naples, Florida 34103		· · · · · · · · · · · · · · · · · · ·	
3. The mailing ac	ldress (if differe	ent):3665 East Bay D	rive Suite 204 MB 435, Largo	, FL 33771		
4. Date of incorporation/qualification: 12/12/1997 Document number: P970001049			P97000104992			
	ment of State: (	If resigned, enter resig	d agent and registered office med)	on file with the		
	Drumm, Thoi	nas J. 				
	999 Vanderbi	lt Beach Rd. #507				
·	Naples, FL 3	1108			-1;	<b>2</b> 024
6. The name and (if changed):	street address o		gent (if changed) and /or regi		TALLAHASSEE	2024 FEB 20
	Business Film	gs Incorporated			SSY	AH
	1200 South Pi	ne Island Road			تى\ <sup>ر.</sup> يىلىــ	
P.O. Box NOT acceptable						9: 02
	Plantation, Flo	mida 33324		-	***	10
The street address changed will	ss of its register be identical.	red office and the stre	et address of the business o	ffice of its regist	ered agen	t,
			ted by its board of directors notified in writing of the ch			
menne		William Thomas, Vic	e President			
Signature of an officer or director		Printed or typed			•	
I hereby accept to I further agree to of my duties, and document is bein corporation has	the appointment o comply with t I am familiar og filed merely been notified i	it as registered agent he provisions of all s with and accept the a to reflect a change in n writing of this chan	and agree to act in this cap tautes relative to the proper obligation of my position as the registered office addres ge.	ncity.  and complete pregistered agent  s, I hereby confi	erforman Or if th rm that th	ce is ie
(Marken		5th day of February	y, 2024			
Signature of Registered Agent		Dat	e			
If signing on bel Chris Das, AVP	•	<del>!</del>				
Ty	ped 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 CR2E045 (04/13)