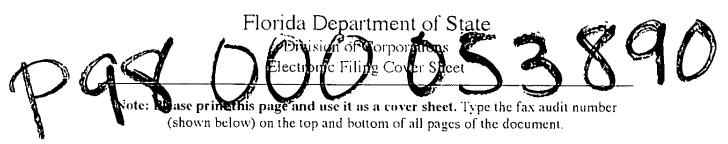
9/17/04, 9/32 AM

Division of Corporations



(((H240003163813)))



		H240003163813ABC	
Note: DO NO		ESH/RELOAD button will generate another	from this Rec.
To:	Division of (Fax Number	Corporations : (850)617-6380	P 17 PH
From:	Account Number Phone	: LEGALINC CORP 2r : I20180000011 : (844)386-0178 : (214)317-4754	INC.
	report mailing	or this business s. Enter only one	

REGISTERED AGENT CHANGE ARGENT INSTITUTIONAL TRUST COMPANY

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

(((H240003163813)))

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

statement of change is submitted for a	607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this corporation organized under the laws of the State of FL				
	red office or registered agent, or both, in the State of Florida.				
	ENT INSTITUTIONAL TRUST COMPANY				
2. The principal office address: 1715 N	S. WESTSHORE BOULEVARD SUITE 750 TAMPA, FL 33607				
3. The mailing address (if different): _					
4. Date of incorporation/qualification:	06/16/1998 Document number: P98000053890				
5. The name and street address of the c Florida Department of State: (If resi	current registered agent and registered office on file with the igned, enter resigned)				
Rhein, Mark					
1715 N. WESTSHOR	1715 N. WESTSHORE BOULEVARD SUITE 750				
TAMPA, FL 33607					
(if changed):	new registered agent (if changed) and /or registered office				
LEGALING CORPOR	RATE SERVICES INC.				
476 Riverside Ave.					
Jacksonville, FL, US,	P O Box NOT acceptable 32202				
The street address of its registered of as changed will be identical.	Tice and the street address of the business office of its registered agent,				
Such change was authorized by resol- authorized by the board, or the corporation	ution duly adopted by its board of directors or by an officer so ration has been notified in writing of the change.				
Gennelor a Rily	Jennifer A. Riley, Corporate Counsel				
Signature of an officer, or, directors	Printed critized name and title				
i hereby accept the áppointment as re I further agree to comply with the pro of my duties, and I am familiar with a document is being filed merely to refl corporation has been notified in writ	egistered agent and agree to act in this capacity, ovisions of all statutes relative to the proper and complete performance and accept the obligation of my position as registered agent. Or, if this lect a change in the registered office address, I hereby confirm that the ing of this change.				
all For	9/13/2024				
Signature of Registered Agent	Date				
If signing on behalf of an entity:					
Erik Treutlein, Asst, Secretary					
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 CR2E045 (04/13)