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RARCICHS

JAN 1 1 7277 ALBRITTON CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 367126 7179415

AUTHORIZATION Spelle Me

COST LIMIT : V\$\35.00

ORDER DATE : January 7, 2022

ORDER TIME : 10:28 AM

ORDER NO. : 367126-005

CUSTOMER NO: 7179415

CHANGE OF AGENT

NAME: CANDELA CONTROLS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

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

statement of cha	nge is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida Sta in organized under the laws of the State of FL ir registered agent, or both, in the State of Flor		
1. The name of t	he corporation: CANDELA CONT	TROLS, INC.		
2. The principal	office address: 751 BUSINESS P	PARK BLVD SUITE 101 WINTER GARDEN.	FL 34787	
3. The mailing a	ddress (if different):			
4. Date of incorp	prporation/qualification: 03/15/1999 Document number: P99000023778			
	I street address of the current registment of State: (If resigned, enter	stered agent and registered office on file with resigned)	the	
	ELLIS, WILLIAM M		207	
16234 Four Lakes Ln.			2077 (**2) 1.0	
	MONTVERDE	FL 34756	10	
6. The name and (if changed):	· ·	red agent (if changed) and /or registered office	AN 0: 52	
	Corporation Service Company			
	1201 Hays Street	P.O. Box NOT acceptable		
	Tallahassee	FL 32301		
The street addre as changed will	ess of its registered office and the be identical.	e street address of the business office of its r	egistered agent,	
Such change wa authorized by th	is authorized by resolution duly a ne board, or the corporation has b	adopted by its board of directors or by an of been notified in writing of the change.	ficer so	
<u></u>	LE Comi		Vice President	
l further agree i of my duties, an document is bei corporation has	to comply with the provisions of a d I am familiar with and accept	Printed or typed name and title gent and agree to act in this capacity. all statutes relative to the proper and complethe obligation of my position as registered age in the registered office address. I hereby change.	ete performance gent. Or, if this confirm that the	
By Dige	- C-Kubi	01/10/2022		
_	nature of Registered Agent half of an entity:	Date		
Grace E. Kirbv.	Asst. Vice President			
· · · · · · · · · · · · · · · · · · ·	ped or Printed Name	_		

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