

8/3/23, 2:51 PM

F

11000004651

Division of Corporations

((H23000270344 3))

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H23000270344 3))



H23000270344ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (350)617-6380

From:

Account Name : URS AGENTS LLC
Account Number : I20150000127
Phone : (800)567-4397
Fax Number : (800)567-4398

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: marie_derose@graycor.com

2023 AUG -3 PM 5:01

REGISTERED AGENT CHANGE
GRAYCOR SOUTHERN INC.

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

Electronic Filing Menu

Corporate Filing Menu

Help

((H23000270344 3))

(((H23000270344 3)))

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GRAYCOR SOUTHERN INC.
Name of Corporation

DOCUMENT NUMBER: F11000064651

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:

Marie DeRose
Name of Contact Person
Graycor Southern Inc.
Firm/Company
Two Mid America Plaza, Suite 400
Address
Oakbrook Terrace, IL 60181
City/State and Zip Code

marie_derose@graycor.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wanda Wolf at (800) 567-4397
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

CR20643 (04/13)

(((H23000270344 3)))

(((H23000270344 3)))

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of DELAWARE _____ in order to change its registered office or registered agent or both, in the State of Florida.

1. The name of the corporation: GRAYCOR SOUTHERN INC

2. The principal office address: 2100 BARRETT PARK DRIVE, SUITE 501, KENNESAW, GA 30133

3. The mailing address (if different): 2 MID AMERICA PLAZA, SUITE 400, OAKBROOK TERRACE IL 60181

4. Date of incorporation/qualification: 6-2-2008 Document number 4553436

5. 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)

CI Corporation System
1200 South Pine Island Road
Plantation, FL 33324

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

URS AGENTS, LLC
3408 Lakeshore Drive
Tallahassee, FL 32312
PO Box Not Acceptable

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 corporation has been notified in writing of the change.

[Signature]
Signature of an officer or director

WILLIAM WOOD, VICE PRESIDENT
Printed or typed name and title

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.)

[Signature]
Signature of Registered Agent

8/3/2023
Date

If signing on behalf of an entity:

Heather Vena, 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 32313
CR23045 (04/13)

(((H23000270344 3)))