F13000002706

(Requestor's Name)					
(Address)					
,					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
·					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
Special mandatone to 1 ming smeat.					

Office Use Only



100405617961

2023 APR -1, AM 9: 30



A 1 3 7 12 APR - 5 2023 CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195						
REFERENCE : 623269 8409856						
AUTHORIZATION: SANTERON						
COST LIMIT : \$ 35.00						
ORDER DATE: March 30, 2023						
ORDER TIME : 2:58 PM						
ORDER NO. : 623269-004						
CUSTOMER NO: 8409856						
CHANGE OF AGENT						
NAME: PROFINISH COATINGS, INC.						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY						
XX PLAIN STAMPED COPY						
CONTACT DEDGON. Eviliana Bakor						
CONTACT PERSON: Eyliena Baker						
EXAMINER'S INITIALS:						

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

statement of cha	provisions of sections 607.0502, 617.050. inge is submitted for a corporation organ ir to change its registered office or registe	ized under the law	s of the State of NORTH	CAROLINA
1. The name of t	the corporation: PROFINISH COATINGS	S, INC.		
	office address: 5700 CHAPEL HILL ROA			
	ddress (if different):		_	.
•	poration/qualification: 06/20/2013	Document n	umber: F1300000270	6
5. The name and	I street address of the current registered at tment of State: (If resigned, enter resigne	gent and registered		
	INCORP SERVICES, INC.			
	3458 LAKESHORE DRIVE			
	TALLAHASSEE	FL	32312	
6. The name and (if changed):	I street address of the new registered agen Corporation Service Company	t (if changed) and	/or registered office	7023 APR
	1201 Hays Street			÷-
		NOT acceptable		A.
	Tallahassee	FL	32301	. <u>.</u>
The street addre as changed will	ess of its registered office and the street a be identical.	address of the bus	iness office of its regi	
Such change wa authorized by th	as authorized by resolution duly adopted the board, or the corporation has been not	by its board of di ified in writing of	rectors or by an office the change.	r so
X el	2 GONE	Jill Cilmi, Vice P	resident	
Signatui	e of an officer or director	Printee	or typed name and title	
l fürthet agree i of my duties, an document is bei corporation has	the appointment as registered agent and comply with the provisions of all state of I am familiar with and accept the obling filed merely to reflect a charge in the been notified in writing of this change. Service Company	ites relative to the gation of my posit	proper and complete von as registered ager	performance it. Or, if this firm that the
By:∑\n	real of woll	04/04/2023		
Sigi	nature of Registered Agent		Date	
If signing on be	half of an entity:			
	Asst Vice President			
Ту	ped or Printed Name			
	* * * FILING FE	E: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
15 (04/13)