F000000004666

(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:	

Office Use Only



400290381774

DEPARTMENT OF STATE

09/20/16--01004--026 **35.00

SECURITION OF CORPORATIONS
16 SEP 19 PH 4: 07

SEP 20 2016 CMCNAIR



September 19, 2016

16 SEO 19 PA W. O.

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re:

Order #: 10161056 SO

Customer Reference 1: None Given Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

Chessie Computer Services, Inc. (DE) Change of Agent Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at $(850)\ 222-1092$.

Thank you very much for your help.

Sincerely,

Connie R Bryan Senior Fulfillment Specialist Connie.Bryan@wolterskluwer.com

COVER LETTER

TO: Amendment Section Division of Corporations

SURTROTT	SSIE COMPUTER SERVICES, INC.	
SOBBECT	Name of Corp	poration
DOCUMENT NO	F00000004666 UMBER:	· · · · · · · · · · · · · · · · · · ·
The enclosed State	ement of Change of Registered Office//	agent and fee are submitted for filing.
Please return all c	orrespondence concerning this matter to	the following:
	•	
	Name of Conta	et Person
	Firm/Comp	pany
•	Address	
	City/State and 2	Zip Code
	·	
-	E-mail address: (to be used for futu	re annual report politication)
	L'inait addição. (10 00 asod foi tina	o unitali report notification,
For further informa	ation concerning this matter, please call	· •
		.,,
Nac	me of Contact Person	at () Area Code & Daytime Telephone Number
	00 check made payable to the Departme	nt of State.
	Malling Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee FI 32314	2661 Evecutive Center Circle

Tallahassee, FL 32301

CR2E045 (03/12)

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 Dolaware in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: CHESSIE COMPUTER SERVICES, INC.
2. The principal office address:
3. The mailing address (if different):
4. Date of incorporation/qualification: 8/8/2000 Document number: F00000004666
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)
CORPORATE CREATIONS NETWORK INC
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
C T Corporation System
c/o C T Corporation System, 1200 South Pine Island Road
P.O. Bux NOT acceptable
Plantation, Florida 33324
The street address of its registered office and the street address of the business office of its registered agen 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.
MARK D. AUSTIN
Signature of an Afficer or director
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.
C T Corporation System By: 9/15/2016
Signature of Registered Agent Date
Alfred Younan Assistant Secretary
Typed or Printed Namo
* * * 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 (03/12)