## F10000000148

(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:				





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2019FEB-1 PM 2: 37





CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby grace.kirby@cscglobal.com

Date: January 30, 2019

Order#: 605024-002

Re: JOHN W. GASPARINI, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35...

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Grace Kirby c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	mge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida organized under the laws of the State of registered agent, or both, in the State of	TX	
1. The name of	the corporation: JOHN W. GASPA	RINI, INC.		
2. The principal				
3. The mailing a	nddress (if different):			
4. Date of incor	poration/qualification: 01/11/2010	Document number: F10000	000148	
	d street address of the current regist rtment of State: (If resigned, enter r	ered agent and registered office on file wesigned)	vith the	
	CT Corporation System		_	
	1200 South Pine Island Road		201	
	Plantation	FL 33324	2019 FEB - 1	-17
6. The name and (if changed):		ed agent (if changed) and /or registered of	Hicego Coc To Figure 18	
	Corporation Service Company		2: 3T	West P
	1201 Hays Street	ox NOT acceptable	- pr1	
	Tallahassee	FL 32301	_	
The street addreas changed will	ess of its registered office and the beidentical.	street address of the business office of it	ts registered agen	ι.
Such change wa	as authorized by resolution duly ac ne board, or the corporation has be	lopted by its board of directors or by an en notified in writing of the change.	officer so	
	et & Court	Jill Cilmi Printed or typed name and til	Vice President	
I hereby accept I further agree of performance of agent. Or, if the hereby confirm	the appointment as registered age to comply with the provisions of a my duties, and I am familiar with	ent and agree to act in this capacity. Il statutes relative to the proper and con and accept the obligation of my position o reflect a change in the registered offic	nplete n as registered	
By: X noc.	nature of Registered Agent	01-30-2019		
_	half of an entity:			
	Asst. Vice President			
	vised or Printed Name			

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