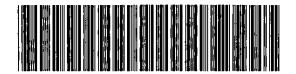
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(Re	equestor's Name)			
(Ad	ddress)			
(Ad	ddress)			
(C	ity/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(B	usiness Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to	Filing Officer:			

Office Use Only



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ALBRITTON



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Mary Rivers mary.rivers@cscglobal.com

Date: September 30, 2016

Order#: 296677-238

Re: ARC CARRIAGE CLUB OF JACKSONVILLE, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

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: Mary Rivers

c/o Corporation Service Company
2711 Centerville Road, Suite 400

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	provisions of sections 607.0502, 617. inge is submitted for a corporation or r to change its registered office or re	ganized under the la	ws of the State of	Tennessee	
1. The name of t	the corporation: ARC CARRIAGE CL	UB OF JACKSONVI	LLE, INC.		
	office address:				
3. The mailing a	address (if different):				
4. Date of incorp	poration/qualification: 09/23/1999	Document	number: F99000	0004917	
	I street address of the current register timent of State: (If resigned, enter res		ed office on file v	with the	
	C T CORPORATION SYSTEM				
	1200 SOUTH PINE ISLAND ROAD			- 35 C	
	PLANTATION	FL	33324		The second secon
6. The name and (if changed):	I street address of the new registered  Corporation Service Company	agent (if changed) and	d /or registered o	office P	
				- ुँ <b>रा</b>	
	1201 Hays Street	NOT acceptable		-	
	Tallahassee	FL	32301		
The street addre	ess of its registered office and the str be identical.	eet address of the bu	siness office of	- its registered agent	t,
	as authorized by resolution duly adopte board, or the corporation has been	oted by its board of d notified in writing o	lirectors or by ar of the change.	n officer so	
	e 2 GOme	Jill Cilmi, Vice F			
I hereby accept I further agree to performance of agent. Or, if thi hereby confirm	the appointment as registered agent to comply with the provisions of all s my duties, and I am familiar with ar is document is being filed merely to that the corporation has been notific n Service Company	t and agree to act in i statutes relative to th ad accept the obligat	e proper and co ion of my positio	mplete on as registered	
By: I ) ju	ace Cokubile	09/30/2016		**************************************	
_	half of an entity:		Date		
•	Assistant Vice President				
	vped or Printed Name				

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