## M07000006578

(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:								

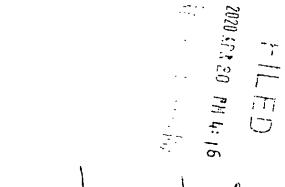
Office Use Only



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RECEIVED
APR 2 0 2020



RARD/Ch8

APR 3 0 2020 LALBRITTON



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: April 17, 2020

Order#: 248661-111

Re: CHIPOTLE SERVICES, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

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: Ami Casper

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 LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

	ame of the limited liability company: CHIPC	JILE SER			197566			
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  Newport Beach  C/ 92660		_ (b)	PO Box 182566  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)				
			_	Columbus, OH 43218				
	11/05/2007			M07000006578				
3.	Date of filing/registration in Florida	a	4.		Document nu	mber		
5. (a)	Cogency Global Inc.				_			
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:							
	115 N. Calhoun Street, Suite 4				_			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)							
							202	
	Tallahanna	771	22204	•	-		2020 J.CA	
(b)	Tallahassee	, FL_	32301	<del></del>	_		r-a Ma	
	Corporation Service Company						Ö	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:				_	-		
							<del>:</del> :	(
	1201 Hays Street				- <b>-</b>		9	
	NEW Registered Office Address:							
	Tallahassee	121	32301		_			
	Talianassee	, FL_	32301	-	_			
the ch agent was/w	limited liability company is not organized und ange or changes are made, the Florida street a will be identical. Or, in the case of a Florida were authorized by an affirmative vote of the naticles of organization or the operating agreem	address of limited lia nembers o	the regist ibility cor f the limi	ered offic npany, it i ted liabilit	e and the busir is hereby confi iy company or	ness offic rmed tha	ce of the it the ch	e registered ange(s)
/s/ Jill Cilmi			Jill C	ilmi, Autho	orized Person			
•	ature of a member or authorized representative of a men				Printed or typed			
provis the ob to me	thy accept the appointment as registered agentions of all statutes relative to the proper and digations of my position as registered agent a rely reflect a change in the registered office and in writing of this change.	nt and agre complete is provided eddress, I h	ee to act performa I for in C iereby co	in this cap nce of my hapter 60, nfirm that	acity. I furthe duties, and I a 5, F.S. Or, if to the limited lia	r agree i m famili his docu bility co	to comp ar with ment is mpany l	ly with the and accept being filed as been
Signat	ure of Registered Agent Corporation Service Co	 ompany	BY: A	mi M. Ca	sper, Asst. Vi	ice Pres	ident	