4/29/2020

...nient of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:			
CINALL	AUUI CSS.			

## REGISTERED AGENT CHANGE THAYER'S, INC.

Certificate of Status	0
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APR 30 2270

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS $$\kappa_{\rm c}$$

statement of cha	provisions of sections 607,0502, 617,0502, 607,1508, or 617,1508, Florida Statutes ange is submitted for a corporation organized under the laws of the State of Florida for to change its registered office or registered agent, or both, in the State of Florida.	ia	
1. The name of	the corporation: Thayer's, Inc.		
2. The principal	Forfice address: 4121 SW 34th Street, Orlando, FL 32811		
3. The mailing s	address (if different):	~~	
	rporation/qualification: 1/2/1948 Document number: 153564		
	id street address of the current registered agent and registered office on file with the intment of State: (If resigned, enter resigned)		
	William P. Kennedy		
	4121 SW 34th Street	***	
	Orlando, Ft. 32811	SEC	2020 APR
6. The name and (if changed):	id street address of the new registered agent (if changed) and for registered office	RE FAR / AHASSF	APR 29
	CT Corporation System	inc.	ÁH
	1200 South Pine Island Road	_0% \ \	ά
	P.O. Box. NO Encreptable Plantation, FL 32324	ĘĦ	ţ
The street address changed will	ress of its registered office and the street address of the business office of its regist the identical.	ered agen	t.
	as authorized by resolution duly adopted by its board of directors or by an officer he board, or the corporation has been notified in writing of the change.		
Willo	william P. Kennedy, President		
Signan	are of or other or typed name and title		
	I the appointment as registered ordent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete p od I am familiar with and accipit the obligation of my pastion as registered agent ing filed mersly to reflect a change in the registered office address. Thereby confi is been natital in writing at interchange.	erformana Or if th rm that th	ie Is e
\ <b>/</b> U	gusture of Registered Agent 1970 1970 1970 1970 1970 1970 1970 1970		
$H^{-1}$	chalf of an entity:		
Jam	es M. Halpin		
Assi	stant Secretary GFEE: \$35.00 * * *		
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MAKE CHECKS PAYABLE TO FLORIDA DUPAR IMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)