(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	-
(Cit	ty/State/Zip/Phone	e #)
	_	_
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates of Status	
Capial lastocations to	Cilia Office	·
Special Instructions to	Filing Onicer:	

Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Logan Hall logan.hall@cscglobal.com

Date: June 17, 2019

Order#: 810473/005

Re: MUNICIPAL CODE CORPORATION

Enclosed please find:

<u>XX</u> 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 Return Regular Mail in the enclosed envelope.

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

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

INCA.XCOA

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

statement of c	he provisions of sections 607.0502, 617. change is submitted for a corporation of	rganized under the laws of the State of	f FL	
	der to change its registered office or re		Florida.	
	of the corporation: MUNICIPAL CODE	·	····	<del></del>
2. The princip	pal office address: 1700 CAPITAL CIRC	CLE SW TALLAHASSEE, FL 32310	· <del>-</del> · · · · · · · · · · · · · · · · · · ·	
3. The mailing	g address (if different): P.O. BOX 2235	TALLAHASSEE, FL 32316		
4. Date of inco	orporation/qualification: 03/22/1951	Document number: 164625	5	
5. The name a	and street address of the current register partment of State: (If resigned, enter res	ed agent and registered office on file v		
	LANGFORD, A. LAWTON		_	
	1700 CAPITAL CIRCLE, SW		_	
	TALLAHASSEE	FL 32310	<b>20</b>	
6. The name a (if changed)	and street address of the new registered (	agent (if changed) and /or registered o		Laria escenti escoladi
	Corporation Service Company		_ <b>0</b>	्र इन्द्रम्य
	1201 Hays Street			
		NOT acceptable		
	Tallahassee	FL 32301	ं सी <b>क</b> -	
The street add as changed wi	dress of its registered office and the strill be identical.	eet address of the business office of i	ts registered agent,	
Such change vauthorized by	was authorized by resolution duly adop- the board, or the corporation has been	oted by its board of directors or by an motified in writing of the change.	officer so	
Blaine Click, Secretary				
-	ature of an officer or director	Printed or typed name and tr	ilc	
i juriner agree performance o ageni. Or, if i hereby confirm	ot the appointment as registered agent e to comply with the provisions of all s of my duties, and I am familiar with an this document is being filed merely to r m that the corporation has been notifie ion Service Company	statutes relative to the proper and con	nplete n as registered ce address, l	
By: L	ignature of Registered Agent	06/17/2019		
If signing on b	pehalf of an entity:	<i>-</i> 444		
GRACE E. KII	RBY, ASST. VICE PRESIDENT			
	Typed or Printed Name			

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