## 651599

(Red	questor's Name)	
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(City	//State/Zip/Phone	e #)
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SECRETARY OF STATE
TAIN AND SEE FLORID.

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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: May 9, 2017

Order#: 623632/012

Re: THE KESSLER GROUP, 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 Return Regular Mail in the enclosed envelope.

Attn:Lindsey Lockard c/o Corporation Service Company 2711 Centerville Road, Suite 400 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 ch	provisions of sections 007.0302, 017.030 ange is submitted for a corporation orga er to change its registered office or regist	nized under the laws of the State of	FL
1. The name of	the corporation: THE KESSLER GROUP	P, INC.	
2. The principa	office address: 100100 Overseas High	way, #371859, Key Largo, FL 3303	37
3. The mailing	address (if different):		
4. Date of incor	poration/qualification: 11/26/1979	Document number: 651599	
5. The name an	d street address of the current registered a rtment of State: (If resigned, enter resigned	ngent and registered office on file w	
	Harold Kessler		
	100100 Overseas Highway, #371859		17 I
	Key Largo	FL 33037	LVIII I
6. The name and (if changed):	d street address of the new registered age	nt (if changed) and /or registered of	
	Corporation Service Company		17ATI 10RIO
	1201 Hays Street		>
	P.O. Box NOT	'acceptable FL 32301	
	Tallahassee	1L 32301	
The street address changed will	ess of its registered office and the street be identical.	address of the business office of it	s registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of directors or by an tified in writing of the change.	officer so
X	xel & GOME	Jill Cilmi	Vice President
Signaki	re of an officer or director	Printed or typed name and titl	e
I further agree i performance of agent. Or, if th hereby confirm	The appointment as registered agent and to comply with the provisions of all state my duties, and I am familiar with and a is document is being filed merely to reflet that the corporation has been notified in Service Company	ites relative to the proper and com	plete as registered e address, I
By Lind	son M. Lockard	05/08/2017	
V ' Sign	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Lindsey M. Loc	kard, Asst. Vice President		
Ty	ped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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