## 844789

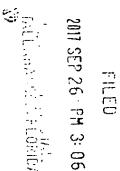
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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09/26/17--01019--015 ++35.00



C. GOLDEN SEP 2 7 2017



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Seeman ashley.seeman@cscglobal.com

Date: September 25, 2017

Order#: 831163-066

Re: KING'S CROWN FORD, 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: Ashley Seeman

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 CORPORATIONS

statement of cha	nge is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida organized under the laws of the State of registered agent, or both, in the State of	DELAWA		
1. The name of t	he corporation: KING'S CROWN F	ORD, INC.	.=		
2. The principal	office address: 10720 PHILLIPS HI	ORD, INC. IGHWAY JACKSONVILLE, FL 32256			<del></del>
3. The mailing a	ddress (if different): 200 SW 1ST A	AVENUE 14TH FLOOR FT. LAUDERDA	ALE, FL 3	3301	
4. Date of incorp	poration/qualification: 12/07/1979	Document number: 844789	)		
	street address of the current registe tment of State: (If resigned, enter re	ered agent and registered office on file wasigned)	rith the		
	BETHEL, ALISON E				
	200 SW 1ST AVENUE 14TH FLO	OR 5	2	20	
	FORT LAUDERDALE	FL 33301		17 SEP	
6. The name and (if changed):	street address of the new registered	l agent (if changed) and /or registered of	ffice m	P26 PH	FILED
	Corporation Service Company		. 교. - 도로	က္	
	1201 Hays Street		<u> </u>	90	
		x NOT acceptable			
	Tallahassee	FI. 32301	•		
The street addre as changed will	ss of its registered office and the sibe identical.	treet address of the business office of it	ts register	ed age	ent,
Such change was authorized by the	s authorized by resolution duly add the board, or the corporation has bee	opted by its board of directors or by an en notified in writing of the change.	officer so	)	
Han	rock ander	JAMES BENDER	PRESI	DENT	Γ
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered ager o comply with the provisions of all my duties, and I am familiar with c	Printed or typed name and tit int and agree to act in this capacity. I statutes relative to the proper and con and accept the obligation of my position or reflect a change in the registered offic fied in writing of this change.	aplete n as regis	iered s, I	-
By: ) Mar	ature of Registered Agent	09/19/2017 Date			_
If signing on bel	half of an entity:				
GRACE E. KIR	BY, ASST. VICE PRESIDENT				
Ту	ped or Printed Name				

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