F01000002835

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

Office Use Only



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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: Janis M. Smith janis.smith@cscinfo.com

Date: March 19, 2015

Order#: 537368-006

Re: S & M BRANDS, INC.

Enclosed please find:

XX __ 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 Please return evidence to the following:

Attn: Janis M. Smith c/o Corporation Service Company 2711 Centerville Road, Suite 400 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 che	ange is submitted for a corporation	7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of VA registered agent, or both, in the State of Florida.	
1 The name of	the corporation: S & M BRANDS, I	NC.	
2. The principal	office address: 3662 Ontario Roac	1, Suite B, Keysville, VA 23947	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 05/21/2001	Document number: F01000002835	
	d street address of the current register frament of State: (If resigned, enter re	ered agent and registered office on file with the esigned)	
	C T CORPORATION SYSTEM		
	1200 South Pine Island Road		
	Plantation	FL 33324	
6. The name an (if changed):	-	d agent (if changed) and /or registered office	
	Corporation Service Company	AR 1	3
	1201 Hays Street	ox NOT acceptable	
	Tallahassee	FL 32301 CRITE 4	မှ သ
The street addr	ress of its registered office and the s	street address of the business office of its registered ager	rt,
		dopted by its board of directors or by an officer so en notified in writing of the change.	
		Dona Priebe, Vice President	
Sylne	n office director	Printed or typed name and title	
I further agree performance of agent. Or, if the hereby confirm	to comply with the provisions of all f my duties, and I am familiar with	ent and agree to act in this capacity. Il statutes relative to the proper and complete and accept the obligation of my position as registered to reflect a change in the registered office address, I ified in writing of this change.	
By: Sign	in augger	03/17/2015	
	gnature of Registered Agent ehalf of an entity:	Date	
	et, Asst. Vice President		
	Typed or Printed Name		

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