F02000004640

(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



700296031007

03/06/17--01033--015 **35.00



V HERRING MAR 1 0 2017



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Seeman ashley.seeman@cscglobal.com

Date: March 2, 2017

Order#: 530958-010

Re: T.F.R. ENTERPRISES, 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 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.

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

statement of ch	ange is submitted for a corpora	2, 617.0502, 607.1508, or 617.1508, Florida Statute tion organized under the laws of the State of <u>Tenni</u> e or registered agent, or both, in the State of Florida	essee	
1. The name of	the comoration: T.F.R. Enterpr	rises, Inc. d/b/a T.F.R., Inc. of Texas		
2. The principal	office address: 601 Leander D	Pr, Leander, TX 78641		
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 09/10/2	Document number: F0200000464	40	
	d street address of the current re runent of State: (If resigned, en Gill Sikes	egistered agent and registered office on file with the ter resigned)	2017	
	302 4th Street NW		MAR -6	
	Steinhatchee, FL 32359		PA S	
6. The name and (if changed):	d street address of the new regis	stered agent (if changed) and /or registered office	12: 59	
	Corporation Service Compan	у		
	1201 Hays Street			
	P.O. Box NOT acceptable			
	Tallahassee	FL 32301		
The street address changed will	ess of its registered office and be identical.	the street address of the business office of its regis	itered agent,	
Such change wa authorized by the	s authorized by resolution dul board, or the corporation ha	ly adopted by its board of directors or by an officer is been notified in writing of the change.	r soʻ	
	re of an officer or director	Julie Rowland, Chief Financial Officer/S	Secretary	
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered to comply with the provisions my duties, and I am familiar v is document is being filed mer	l agent and agree to act in this capacity. of all statutes relative to the proper and complete with and accept the obligation of my position as re ely to reflect a change in the registered office addi notified in writing of this change.	gistered ress, I	
By: Dra		03/02/2017		
	nature of Registered Agent chalf of an entity:	Date		
Grace E. Kirby	, Assistant Vice President			
	yped or Printed Name			

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