## F02000006390

(Re	questor's Name)			
(Ad	dress)			
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Na	me)		
(Do	cument Number	<del>)</del>		
Certified Copies	_ Certificate	s of Status		
Special Instructions to Filing Officer:				
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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: Tecora Bell tecora.bell@cscqlobal.com

Date: January 20, 2017

Order#: 473645-031

Re: SEGREST, 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: Tecora Bell 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 cha	ange is submitted for a corporation or	0502, 607.1508, or 617.1508, Florida Statutes ganized under the laws of the State of DE gistered agent, or both, in the State of Florida.	<del></del>
	the corporation: SEGREST, INC.		
2. The principal	office address: Segrest Inc and Road Gibsonton, FL 33534	* ************************************	
	address (if different): Segrest Inc. at Blvd. suite 600 Walnut Creek, CA 9	94597	
4. Date of incorp	poration/qualification: 12/26/2002	Document number: F02000006390	
5. The name and		ed agent and registered office on file with the gned)	
	C T Corporation System		
	1200 S Pine Island Road		ويم
	Plantation, FL 33324		温温
6. The name and (if changed):	d street address of the new registered a  Corporation Service Company	ngent (if changed) and /or registered office	FILED H24 TI
	1201 Hays Street		7.02
		NOT acceptable	景がの
	Tallahassee	FL 32301	
The street addre	ess of its registered office and the stre be identical.	eet address of the business office of its registe	ered agent,
Such change wa authorized by th	as authorized by resolution duly adop he board, or the corporation has been	nted by its board of directors or by an officer s notified in writing of the change.	30
Juilly Signatu	A. A. ar officer or director	Frinted or typed name and title	Aust. Sec
I further agree if performance of agent. Or, if this hereby confirm	"my duties, and I am familiar with an	tatutes relative to the proper and complete d accept the obligation of my position as regi reflect a change in the registered office addre	istered ss, 1
_	nature of Registered Agent  chalf of an entity:	Date	
	Asst. Vice President		
Ty	yped or Printed Name		

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