F0400003070

(Re	equestor's Name)	•	
(Ad	dress)		
(Ad	ldress)		
(Cit	ty/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Nar	me)	
(Do	ocument Number)	. <u>.</u>	
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



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RAROICHS 10.00.13



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Alex Smetana

Date: October 11, 2013

Order#: 825586-059

Re: CGB DIVERSIFIED SERVICES, 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: Alex Smetana

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	provisions of sections 607.0302, 6 nge is submitted for a corporation r to change its registered office or	organized under the la	ws of the State o	f Louisiana	
1. The name of t	he corporation: CGB DIVERSIFIE	D SERVICES, INC.			
• •	office address: Lafayette, Jacksonville, LA 626	50			
<u> </u>	ddress (if different):249, Mandeville, LA 70470				
4. Date of incorp	orporation/qualification: 06/28/2004 Document number: F04000003670				
	street address of the current regis tment of State: (If resigned, enter		ed office on file	with the	
	C T Corporation System			_	
	1200 South Pine Island Road				۰ . :
	Plantation	FL	33324	- 67	
6. The name and (if changed):	street address of the new registere	ed agent (if changed) an	d /or registered (−	
	Corporation Service Company			_ _	
	1201 Hays Street				
		Box NOT acceptable	00004	_	
	Tallahassee	FL_	32301		
The street addre	ss of its registered office and the be identical.	street address of the bu	siness office of	its registered agent.	
Such change wa authorized by th	s authorized by resolution duly a e board, or the corporation has be	dopted by its board of deen notified in writing o	lirectors or by an of the change.	n officer so	
				Vice President	
I hereby accept I further agree to performance of agent. Or, if this hereby confirm to	the appointment as registered ag o comply with the provisions of a my duties, and I am familiar with s document is being filed merely that the corporation has been not n Service Company	ent and agree to act in ill statutes relative to th and accept the obligat to reflect a change in th	ion of my position he registered off	omplete on as registered	
	abire of Registered Agent		October 7, 2013		
If signing on bel			Date		
	Asst. Vice President				
	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 * * *