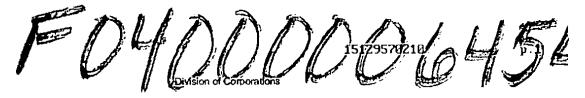
1/7/2019



Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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(((H19000007258 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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REGISTERED AGENT CHANGE NEWBN, INC.

Certificate of Status	0
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COVER LETTER

TO:

Amendment Section Division of Corporations

Newbn, Inc.

Name of Corporation

04000006454

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mary Castillo

Name of Contact Person

Registered Agent Solutions, Inc.

Firm/Company

1701 Directors Blvd, Ste 300

Address

Austin, TX 78744

City/State and Zip Code

notices@rasi.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Contact Person

England in a 195 M short wade warbly to the Donatown of State. Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (03/12)

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

statement of cha	provisions of sections 607,0502, 617.050 nge is submitted for a corporation organ to change its registered office or registe	nized under the laws of the State of [Texas
1. The name of t	he corporation: Newbn, Inc.		
3. The mailing a	ddress (if different);		
4. Date of incorp	oration/qualification: 11/12/2004	Document number: F040	00006454
	street address of the current registered a tment of State: (If resigned, enter resigne		ith the
	Corporate Creations	Network Inc.	
	11380 Prosperity Farms Road #	221E	. 23
	Palm Beach Gardens	FL 33410	2019 JAN -7 SECRETARY SECRETARY
6. The name and (if changed):	street address of the new registered age	nt (if changed) and /or registered of	
	Registered Agent Solutions,	Inc.	PH 4: 28
155 Office Plaza Dr., Suite A			
	Tallahassee, FL 32301	a acceptance	
The street addre	ss of its registered office and the street be identical.	address of the business office of it	s registered agent,
Such change wa authorized by th	s authorized by resolution duly adopted e board, or the corporation has been no	by its board of directors or by an tified in writing of the change.	officer so
/S/ Joel R	e of an officer or director	Joel Ray	CEO
I hereby accept I further agree to performance of avent Or if the	the appointment as registered agent an ocomply with the provisions of all statemy duties, and I am familiar with and a s document is being filed merely to reflict the corporation has been notified in	d agree to act in this capacity. utes relative to the proper and con accept the obligation of my position ect a change in the registered offic	aplete i as registered
<u>-</u>	half of an entity:	Date	
Justine Karr	pell - Assistant Secretary		