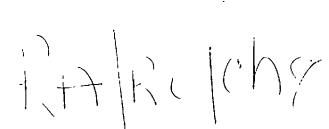
## F05000005862

(Address)	100352057971
(City/State/Zip/Phone #)	
(Business Entity Name)	16/22/2001015005 ++35.00
(Document Number)  Certified Copies Certificates of Status	20.,
Special Instructions to Filing Officer:	

Office Use Only



SEC 0 2 2020

! ALBRITTON



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Jacqueline Holloway jacqueline.holloway@cscglobal.com

Date: October 20, 2020

Order#: 443165-007

Re: CAL-MAINE FOODS, 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.

 $\overline{XX}$  Please return evidence to the following:

Attn: Jacqueline Holloway

c/o Corporation Service Company

251 Little Falls Drive 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	nge is submitted for a corpord	12, 617.0502, 607.1508, or 617.1508, Florida Statutes, this attion organized under the laws of the State of DE te or registered agent, or both, in the State of Florida.	_
	he corporation: CAL-MAINE F		
2. The principal	office address:ODDROW WILSON AVE, JA	<del></del>	
3. The mailing a	ddress (if different):		
4. Date of incorp	ooration/qualification: 10/10/2	2005 Document number: F05000005862	
	I street address of the current r tment of State: (If resigned, er	registered agent and registered office on file with the inter resigned)	
	C T CORPORATION SYST	ЕМ	
	1200 SOUTH PINE ISLAND	) ROAD	
	PLANTATION	FL 33324	; -
6. The name and (if changed):	_	istered agent (if changed) and /or registered office	
	Corporation Service Compa	<u> </u>	:
	1201 Hays Street		95 28
	Tallahassee	FL 32301	دی
The street addre	ess of its registered office and be identical.	I the street address of the business office of its registered ag	ent.
Such change wa authorized by th	as authorized by resolution du ne board, or the corporation h	uly adopted by its board of directors or by an officer so as been notified in writing of the change.	
Xie	. E. agni	Jill Cilmi, Vice President	
I hereby accept I further agree to of my duties, an document is bei corporation has	to comply with the provisions of I am familiar with and acc	Printed or typed name and title  d agent and agree to act in this capacity. s of all statutes relative to the proper and complete performe ept the obligation of my position as registered agent. Or, if namge in the registered office address, I hereby confirm that his change.	thi:
By: Dac	co rokubio	10/06/2020	_
_	nature of Registered Agent  half of an entity:	Date	
Grace E. Kirby,	Asst. Vice President yped or Printed Name		

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