F050000007013

(Re	questor's Name)	
(Ad	(dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: December 10, 2020

Order#: 544198-012

Re: MARATHON ADMINISTRATIVE CO., INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

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: Ami Casper

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	provisions of sections 607.0502, 61 nge is submitted for a corporation or r to change its registered office or r	organized under the lav	vs of the State	of Dela	ware	· ———
	he corporation: MARATHON ADM			•		
2. The principal	office address: 1476 N. Green Mor	unt Road, O'Fallon, IL	62269	_		
3. The mailing a	ddress (if different): PO Box 961,	O'Fallon, IL 62269				
	poration/qualification: 11/29/2005		number: <u>F05</u> 0	00000701	3	
	street address of the current registe tment of State: (If resigned, enter re		d office on fil	e with the	:	
	C T Corporation System					
	1200 South Pine Island Road					
	Plantation	FL	33324			
6. The name and (if changed):	street address of the new registered	d agent (if changed) and	i /or registered	d office	~1	
	<u></u>		· · · · · · · · · · · · · · · · · · ·		303	
	1201 Hays Street	O Box NOT acceptable				
	Tallahassee	FL	32301		:	
The street addre	ss of its registered office and the s	street address of the bu	siness office	of its regi	stered S	agent.
Such change was authorized by th	is authorized by resolution duly ac board, or the corporation has be	lopted by its board of c en notified in writing c	lirectors or by of the change.	/ an office	er <u>\$0</u>	
Xie	2 agric	Jill Cilmi, Vice	President			
/)°	e of an officer or director		ed or typed name a			
I further agree to of my duties, an document is being corporation has	the appointment as registered age to comply with the provisions of all I am familiar with and accept the filed merely to reflect a change been notified in writing of this changers.	l statutes relative to th e obligation of my pos in the registered offic	e proper and	complete	perfoi nt. Or ifirm t	rmance , if thi: hat the
By: Ce	in lei	12/10/2020				
Sigi	Mature of Registered Agend		Date			
it signing on be	half of an entity;					
	Asst. Vice President rped or Printed Name					

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