## F0600000783

(Requestor's Name)						
(Address)						
(Address)						
(1001033)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Basilisto Ellin, Tallis)						
(Document Number)						
Certified Copies Certificates of Status						
Consideration to Cities Officer						
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: January 10, 2019

Order#: 574480-147

Re: ROUGH BROTHERS, 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	inge is submitted for a	corporation organ	2, 607.1308, or 617.130 ized under the laws of t ered agent, or both, in t	he State of Ohio	<u> </u>
	the corporation: ROUC			•	
2. The principal	office address: 3556 I	_ake Shore Road,	Buffalo, NY 14219		
3. The mailing a	ddress (if different):				
4. Date of incorporation/qualification: 02/06/2006 Document number: F0				F060000007	83
	I street address of the comment of State: (If resign	_	gent and registered offi d)	ce on file with the	e
	C T Corporation Syst	em			
	1200 South Pine Islan	nd Road			
	Plantation		FL 3332	24	Ö
6. The name and (if changed):	I street address of the r	new registered ager	nt (if changed) and /or r	egistered office	 
	Corporation Service	Company			••
	1201 Hays Street				ි <u>.</u> න
	Tallahassee	P.O. Box NOT	acceptable FL 3230	)1	5. 29
The street addreas changed will	ess of its registered off be identical.	ice and the street	address of the business	office of its regi	stered agent,
Such change wa authorized by th	as authorized by resolute board, or the corpor	ition duly adopted ation has been not	by its board of directo ified in writing of the	rs or by an office change.	er so
<u>Xi</u>	e E. aon	<u>i.                                    </u>	Jill Cilmi, Vice Preside		·
I hereby accept I further agree of performance of agent. Or, if the hereby confirm	to comply with the promy duties, and I am fois is document is being fi	visions of all stati miliar with and a iled merely to refle as been notified in	d agree to act in this co tes relative to the prop ecept the obligation of ect a change in the reg writing of this change	ger and complete my position as re istered office add	egistered
By: Cei	; m Le		01/10/2019		
	nature of Registered Agent		I.	lat <del>e</del>	
	half of an entity:				
	Asst. Vice President  yped or Printed Name				

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

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