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(Re	equestor's Name)			
(Ad	ldress)			
(Ac	ddress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

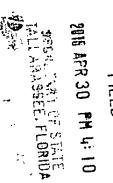
Office Use Only



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5/6/15



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ellen Rosaio ellen.rosaio@cscglobal.com

Date: April 28, 2015

Order#: 594551-020

Re: CAFE SERVICES, 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: Ellen Rosaio

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 ch	ange is submitted for a corporatio	617.0502, 607.1508, or 617.1508, Florid on organized under the laws of the State o or registered agent, or both, in the State o	New Hampshire	
1. The name of	the corporation: CAFE' SERVICE	ES, INC.		
2. The principa	l office address: 1 E COMMONS I	DR #25, LONDONDERRY, NH 03053		
3. The mailing	address (if different): P.O. BOX 1	069, LONDONDERRY, NH 03053 10		
4. Date of incom	rporation/qualification: 06/07/200	Document number: F0600	0004003	
	nd street address of the current reginartment of State: (If resigned, enter	istered agent and registered office on file r resigned)	with the	
	C T CORPORATION SYSTEM	49	建筑是	
	1200 SOUTH PINE ISLAND ROAD			
	PLANTATION	FL 33324		
6. The name an (if changed):	-	ered agent (if changed) and /or registered	PILED FILED Office of the state	
	Corporation Service Company		. y -	
	1201 Hays Street			
	P.O. Tallahassee	Box NOT acceptable FL 32301		
		e street address of the business office of		
Such change wauthorized by	vas authorized by resolution duly the board, or the corporation has l	adopted by its board of directors or by a been notified in writing of the change.	n officer so	
0		Dona Priebe	Vice President	
I hereby accep I further agree performance o agent. Or, if thereby confirm Corporation	to comply with the provisions of f my duties, and I am familiar wit	Printed or typed name and agree to act in this capacity, all statutes relative to the proper and cath and accept the obligation of my posity to reflect a change in the registered of otified in writing of this change. 04/28/2015	omplete on as registered	
By: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	gnature of Registered Agent	Date	Litera .	
If signing on b	ehalf of an entity:			
	y, Assistant Vice President	_		
	Typed or Printed Name			

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