## F0700000 4573

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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: June 17, 2015

Order#: 662474-001

Re: MOHLIN & COMPANY

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.

XX Please return evidence to the following:

Attn: Lindsey Lockard 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.

OUCA.XCOA

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

statement of ch	ange is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statute corganized under the laws of the State of ME registered agent, or both, in the State of Florida	
1. The name of	the corporation: MOHLIN & COMP	PANY, INC.	
2. The principa			
3. The mailing	address (if different):		EGA JUN
4. Date of incom	rporation/qualification: 09/13/2007	Document number: F07000004573	\$5.00 P
5. The name an		tered agent and registered office on file with the	PH 12: 33
	CT CORPORATION SYSTEM		<b>⊋</b> ™ &
	1200 SOUTH PINE ISLAND ROA	AD	
	PLANTATION	FL 33324	
6. The name an (if changed):		ed agent (if changed) and /or registered office	
	1201 Hays Street		
	P.O. Box NOT acceptable		
	Tallahassee	FL 32301	
The street addr as changed wil	ress of its registered office and the label identical.	street address of the business office of its regist	ered agent,
Such change wathorized by t	as authorized by resolution duly ac he board, or the corporation has be	dopted by its board of directors or by an officer en notified in writing of the change.	so
$\mathcal{T}$		Dona Priebe Vice	President
I hereby accept I further agree performance of agent. Or, if the hereby confirm	to comply with the provisions of a fmv duties, and I am familiar with	Printed or typed name and title ent and agree to act in this capacity. Il statutes relative to the proper and complete and accept the obligation of my position as reg to reflect a change in the registered office addr- ified in writing of this change.  06-12-15	ristered ess, I
_ <del></del>	enature of Registered Agent	Date	
If signing on be	chalf of an entity:		
Grace E. Kirby	, Assistant Vice President		
7	yped or Printed Name		

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