F08000000755

· <u>·</u>				
(Requestor's Name)				
· (Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document 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: Soraya Sariaslani soraya.sariaslani@cscglobal.com

Date: November 14, 2018

Order#: 471465-035

Re: FRESHWAY LOGISTICS, 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.

XX____ Please return evidence to the following:

Attn: Soraya Sariaslani 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

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

statement of cha	nge is submitted for a corporation	517.0502, 607.1508, or 617.1508, Florida Statute in organized under the laws of the State of <mark>OH</mark> rregistered agent, or both, in the State of Florida	
1. The name of t	the corporation: FRESHWAY LOC	GISTICS, INC.	
2. The principal	office address: 601 NORTH STO	LLE AVE, SIDNEY, OH 45365	
			_
3. The mailing a	address (if different): 9399 West H	liggins Road, Suite 500, Rosemont, IL 60018	
4. Date of incorp	poration/qualification: 02/19/2008	B Document number: F0800000075	5
	d street address of the current regisetment of State: (If resigned, enter	stered agent and registered office on file with the resigned)	:
	C T CORPORATION SYSTEM		
	1200 SOUTH PINE ISLAND RO	AD	2013
	PLANTATION	FL 33324	NOV 1
6. The name and (if changed):	d street address of the new register	red agent (if changed) and /or registered office	ALKA 91 KON BIOZ
	Corporation Service Company	, , , , , , , , , , , , , , , , , , ,	\$ SZ
	1201 Hays Street		, ,
P.O. Box NOT acceptable			
	Tallahassee	FL 32301	
The street address changed will	ess of its registered office and the be identical.	street address of the business office of its regis	stered agent,
Such change wa authorized by th	as authorized by resolution duly a ne board, or the corporation has b	dopted by its board of directors or by an office een notified in writing of the change.	r so
	Lie & Coni	Jill Cilmi, Vice President	
I further agree performance of agent. Or, if the hereby confirm	to comply with the provisions of a my duties, and I am familiar with	Printed or typed name and title sent and agree to act in this capacity. All statutes relative to the proper and complete is and accept the obligation of my position as re to reflect a change in the registered office add tified in writing of this change.	gistered ress, I
By: The	nature of Registered Agent	11/13/2018 - Date	
_	half of an entity:		
Grace E. Kirby,	Assistant Vice President		
T	yped or Printed Name	-	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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