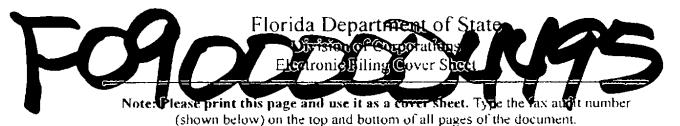
5/2/2019

Division of Corporations



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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338 : (954)208-0845 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:____

REGISTERED AGENT CHANGE DILLING GROUP, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$35.00 |

MAY 0 3 2019

S. YOUNG

Electronic Filing Menu Corporate Filing Menu

Help

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

| statement of cha | provisions of sections 607.0502, inge is submitted for a corporation or to change its registered office o | on organized under t | he laws of the State of IN | |
|-----------------------------------|--|--|---|--------------------|
| 1. The name of t | the corporation: Dilling Group, Inc | · | | |
| 2. The principal | office address: | | <u> </u> | |
| _ | iddress (if different): MILDRED STREET LOGANSPO | | | |
| 4. Date of incor | poration/qualification: 11/16/200 | Document Document | ment number: F0900004495 | |
| | i street address of the current regitment of State: (If resigned, ente | | gistered office on file with the | 19 |
| | CORPORATION SERVICE CON | IPANY | | |
| | 1201 HAYS STREET | | | 11、11 |
| | TALLAHASSEE, FL 32301-2525 | | | 2 ED |
| 6. The name and (if changed): | I street address of the new registe | red agent (if change | d) and /or registered office | 9: 22 1.0000 |
| | C T Corporation System | <u> </u> | | |
| | 1200 South Pine Island Road | | | |
| | P.O Plantation, Florida 33324 | Box NOT acceptable | | |
| The street address changed will | ess of its registered office and the | e street address of the | he business office of its regist | ered agent. |
| Such change was authorized by | is authorized by resolution duly the board, or the corporation has | adopted by its board seen notified in wri | d of directors or by an officer ting of the change. | so |
| - La | Harl | Laura How | rell, Vice President | |
| I hereby accept I further agree i | re of an officer or directed the appointment as registered a to comply with the provisions of my duiles, and I am familiar wit is document is being filed merel that the corporation has been h | gent and agree to a all statutes relative h and accept the on to refect a change officed in writing of | Pinica in typed name and title ct in this capacity, to the proper and complete ligation of my position as reg in the registered office addre this change. | ristered ess, I |
| By: $\frac{A}{2}$ | poration System | | 2/2019 | |
| · | half of an entity: | | 1/310 | |
| Michele Holden, | Asst Sect | | | |
| Т, | pped or Printed Name | - | | |

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)