Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

: CORPORATE CREATIONS INTERNATIONAL INC. Account Name

Account Number : 110432003053

Phone

: (561)694-8107

Fax Number

: (561)694-1639

**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 CHC COMPANIES, INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

APR 1 0 2015 T. CARTER

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

statement of cha	provisions of sections 607,0502, 617.0502, 607 ange is submitted for a corporation organized w ar to change its registered office or registered at	nder the laws of the State of Delaware	-				
1. The name of	the corporation: CHC COMPANIES,	INC.					
2. The principal	office address: 1283 Murfreesboro Final, CO 80112			_			
3. The mailing a	address (if different):			<u> </u>			
4. Date of incom	poration/qualification: 08/10/2011	Document number: F11000003451		_			
	is street address of the current registered agent at riment of State: (If resigned, enter resigned)	nd registered office on file with the					
	CORPORATION SERVICE CO	DMPANY					
	1201 HAYS STREET						
	TALL., FL 32301		15 APR	TALLAHASS			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):							
	Corporate Creations Network I	nc	AH II:				
	11380 Prosperity Farms Road #221E						
	P.O. Box NOT acceptable		2	ÖRİDA			
	Palm Beach Gardens, FL 33410						
	ess of its registered office and the street address be seem sal.		nt,				
Such change we authorized by	is authorized by resolution duly adopted by its ac board, of the corporation has been notified i	board of directors or by an officer so n writing of the change.					
		stine Duran, Attorney-in-Fact	_				
I hereby account the application as registered agent and agree to act in this capacity. I hereby account the application as registered agent and agree to act in this capacity. I further agree to capacity with the provisions of all statutes relative to the proper and complete performance of the capacity with the provisions of all statutes relative to the proper and complete performance of the capacity and I am familiar with and accept the obligation of my position as registered agent. Or, if this accument is being filed merely to reflect a change in the registered office address, I hereby confirm that the forporation has been notified in writing of this change.							
	04/	08/2015					
W	nature of Bigistered Agent half of an entity:	Date	•				
	Pran, Special Secretary Special Secretary Special Secretary						

* * * 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)