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. (Requestor's Name)	
(Address)	
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(1001000)	
(City/State/Zip/Phone #)	
PICK-UP WAIT M	AIL
(Business Entity Name)	
(Document Number)	
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Codification of Oblive	
Certified Copies Certificates of Status _	
Special Instructions to Filing Officer:	
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Office Use Only



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SECRUTARY OF STATE
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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: Mary Rivers mary.rivers@cscglobal.com

Date: February 28, 2018

Order#: 082763-005

Re: DTLR, 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: Mary Rivers 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

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

statement of cha	provisions of sections 607.0502, 61 inge is submitted for a corporation o r to change its registered office or r	organized under the le	aws of the	State of	MARY	LAND
1. The name of t	he corporation: DTLR, INC.					<u>-</u> .
	office address:					
3. The mailing a	ddress (if different):					
4. Date of incorp	poration/qualification: 01/28/2013	Document	t number:	F13000	000402	2
	I street address of the current register tment of State: (If resigned, enter re	-	red office (on file v	vith the	
	C T CORPORATION SYSTEM				_	
	1200 SOUTH PINE ISLAND ROA	D				
	PLANTATION	FL	33324		_	
6. The name and (if changed):	I street address of the new registered Corporation Service Company	l agent (if changed) a	nd /or regi	stered o	ffice	****
	1201 Hays Street			AHAS!	- -	
		P.O. Box NOT acceptable P.O. Box NOT acceptable			2	rn
as changed will		treet address of the b	usiness of) <	ے	tered agent,
authorized by the	is authorized by resolution duly add the board, or the corporation has been	en notified in writing	of the cha	or by an nge.	officer	· so
Manhu	ee E Court	Jill Cilmi, Vice	President	ame and ti	itie	
I further agree to performance of agent. Or, if this hereby confirm	the appointment as registered agei to comply with the provisions of all my duties, and I am familiar with a is document is being filed merely to that the corporation has been notif n Service Company	statutes relative to t and accept the obliga reflect a change in t	he proper tion of my the registe	and cor positio	n as res	gistered ess, I
By:	noco Tokuble	02/26/2018	Date			
	half of an entity:		Date			
Grace E. Kirby,	Asst. Vice President					
Ty	ped or Printed Name					

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

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