

F14000003993

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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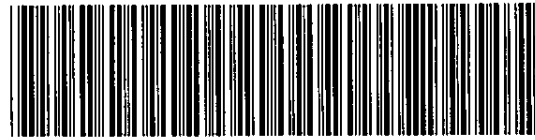
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
14 SEP 25 PM 4:46

APPROVED  
AND  
FILED

14 SEP 25 AM 11:20

XENIEUX T.

5102 9 2 DES

*Handwritten signature*



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 314049 4806334

AUTHORIZATION :

*[Handwritten signature]*

COST LIMIT : \$ 35.00

ORDER DATE : September 25, 2014

ORDER TIME : 3:01 PM

ORDER NO. : 314049-010

CUSTOMER NO: 4806334

CHANGE OF AGENT

NAME: SURFSIDE COFFEE COMPANY 3 INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

           CERTIFIED COPY  
XX            PLAIN STAMPED COPY

CONTACT PERSON: Courtney Williams

EXAMINER'S INITIALS: \_\_\_\_\_

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Surfside Coffee Company 3 Inc.  
Name of Corporation

DOCUMENT NUMBER: H140000222546

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Andrea Duncliffe

Name of Contact Person

McDermott Will & Emery LLP

Firm/Company

340 Madison Avenue

Address

New York, NY 10173

City/State and Zip Code

aduncliffe@mwe.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andrea Duncliffe

Name of Contact Person

at ( 212 ) 547-5317  
Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Surfside Coffee Company 3 Inc.
2. The principal office address: c/o Fireman Capital Partners, 800 South Street, Suite 600, Waltham, MA 02453
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 09/22/14 Document number: H14000222546
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

C T Corporation System

1200 South Pine Island Road

Plantation, Florida 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

1201 Hays Street

P.O. Box NOT acceptable

Tallahassee

FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]  
Signature of an officer or director

Jamie Hudson, VP  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

**Corporation Service Company**

By: [Signature]  
Signature of Registered Agent

9/24/14

Date

If signing on behalf of an entity:

Courtney Williams  
Typed or Printed Name

**Courtney Williams  
Asst. Vice President**

\*\*\* 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)

APPROVED  
AND  
FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA