## 415000001253

(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
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: April Pagliassotti april.pagliassotti@cscglobal.com

Date: July 19, 2016

Order#: 207474-005

Re: KENDRA SCOTT DESIGN, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

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: April Pagliassotti c/o Corporation Service Company 2711 Centerville Road, Suite 400 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	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of DELAWARE registered agent, or both, in the State of Florida.	
1. The name of	he corporation; KENDRA SCOTT	DESIGN, INC.	
	office address:NGRESS AVE A-170, AUSTIN, T		
3. The mailing a	ddress (if different):	: 52	
4. Date of incorp	poration/qualification: 03/25/2015	Document number: F15000001255	
	I street address of the current regis tment of State: (If resigned, enter	stered agent and registered office on file with the resigned)	
	CAPITOL CORPORATE SERVI	CES, INC.	
	155 OFFICE PLAZA DR STE A		
	TALLAHASSEE	FL 32301	
6. The name and (if changed):	I street address of the new register	ed agent (if changed) and /or registered office	
	Corporation Service Company	····	
	1201 Hays Street		
	P.O. F.	30x NOT acceptable  FL 32301	
The street addre	ess of its registered office and the be identical.	street address of the business office of its registered agent,	
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.			
Signaru	re of an officer or director	Jill Cilmi, Vice President  Printed or typed name and title	
I further agree to performance of agent. Or, if the hereby confirm	to comply with the provisions of a	tent and agree to act in this capacity.  All statutes relative to the proper and complete  A and accept the obligation of my position as registered  To reflect a change in the registered office address, I  Tified in writing of this change.	
Ву:	maco 1 - Kinble	07/13/2016	
-	half of an entity:	Date	
	Assistant Vice President		
	ped 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 \* \* \*