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(Re	equestor's Name)	<u>.</u>			
(Address)					
(Address)					
(Cit	ty/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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SECRETARY STREET

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DEC 01707



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Seeman ashley.seeman@cscglobal.com

Date: November 28, 2017

Order#: 931635-005

Re: GEORGIA CERTIFIED DEVELOPMENT CORPORATION

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: Ashley Seeman 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, 617.050 nge is submitted for a corporation organ r to change its registered office or regist	uzed under the lav	ws of the State of	Georgia
1. The name of t	he corporation: GEORGIA CERTIFIED	DEVELOPMENT	CORPORATION	
2. The principal	office address: 3405 Pledmont Road Str	e 500, Atlanta, GA	A 30305	
3. The mailing a	ddress (if different):	<u>. </u>		· · · · · · · · · · · · · · · · · · ·
4. Date of incorp	poration/qualification: 12/15/2016	Document i	number: F160000	005551
	I street address of the current registered a timent of State: (If resigned, enter resigned		ed office on file w	ith the
	CT Corporation System	<u> </u>	<u>.</u>	
	1200 South Pine Island Road			. 1 . 28
	Plantation	FL	33324	TECH TECH
6. The name and (if changed):	d street address of the new registered age	nt (if changed) and	d /or regist ere d of	2017 NOV 30 N
	Corporation Service Company		<u></u>	E D. L.
	1201 Hays Street			
	P.O. Box NOT acceptable FL 32301			
as changed will	ess of its registered office and the street be identical.	address of the bu	asiness office of i	
authorized by the	as authorized by resolution duly adopted to board, or the corporation has been no	otified in writing of	of the change.	Officer so
8P.>		Anthony Christopher, President/CEO		
hereby accept finither agree performance of agent. Or, if the hereby confirm	the appointment as registered agent are to comply with the provisions of all state my duties, and I am familiar with and it is document is being filed merely to refutat the corporation has been notified on Service Company	nd agree to act in tutes relative to th accept the obligat lect a change in th in writing of this c	ie proper ana coi tion of my positio he registered offi	nplete n as registered
By: 1 mc	nature of Registered Agent	11/28/2017 Date		
If signing on be	chalf of an entity:			
	, Assistant Vice President			
·	* * * FILING FI	EE: \$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)