F1800000 1495

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
. (Business Entity Name)
. (Document Number)
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J. HORNE APR 2 3 2024

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WERR 22 PH SELECTION

ALLAHASSEE LORIDA

CORPORATION SERVICE COMPANY 1201 Hays Street Tallbassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

			*			
ACCOUNT NO	э. :	I2000000195	فت			
REFEREN	CE :	411524 8447111				
AUTHORIZATIO	: NC	Charles and	,			
COST LIM	IT :	\$ 35.00				
ORDER DATE : April 10, 2024	4					
ORDER TIME : 1:51 PM						
ORDER NO. : 411524-002						
CUSTOMER NO: 8447111						
CHANGE OF AGENT						
NAME: DOUGLAS FOOD STORES, INC.						
PLEASE RETURN THE FOLLOWING	AS PR	OOF OF FILING:				
CERTIFIED COPY						
XX PLAIN STAMPED COPY						
CONTACT PERSON: Amanda Mill	ler					
	EXAMI	NER'S INITIALS:	- 1.00			

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

statement of cha	provisions of sections 607.0502, 617.0. nge is submitted for a corporation org	anized under the law	vs of the State of \underline{V}	VV
	r to change its registered office or regi	ζ.,	h, in the State of Fl	orida.
1. The name of t	he corporation: DOUGLAS FOOD STO	ORES, INC.		
2. The principal	office address: 301 NORTH STREET	BLUEFIELD, WV 24	4701	<u> </u>
3. The mailing a	ddress (if different):			
4. Date of incorp	oration/qualification: 03/27/2018	Document r	number: <u>F1800000</u>)1495
	street address of the current registered tment of State: (If resigned, enter resig		d office on file witl	n the
	INCORP SERVICES, INC.			
	3458 LAKESHORE DRIVE			
	TALLAHASSEE	FL	32312	
6. The name and (if changed):	street address of the new registered ag	gent (if changed) and	d /or registered offic	2024 APR 22 A
	1201 Hays Street			22 LE
	P.O. E	Box NOT acceptable		147 至口
	Tallahassee	FL	32301	三
The street addre	ss of its registered office and the stree be identical.	et address of the bu	siness office of its	registered agent.
Such change wa authorized by th	s authorized by resolution duly adopt e board, or the corporation has been i	ed by its board of d notified in writing o	lirectors or by an o of the change.	officer so
/s/ Jill Cilmi		Jill C ilmi		Vice President
Signatur	e of an officer or director	Printe	ed or typed name and title	-
I further agree t of my duties, an document is bei corporation has	the appointment as registered agent of a comply with the provisions of all state of a comply with the provisions of all state of a compliar with and accept the of a filed merely to reflect a change in been notified in writing of this change. Service Company	atutes relative to the bligation of my posi the registered office	this capacity, e proper and comp ition as registered e address, I hereby	olete performance agent. Or, if this confirm that the
By: Y) rac	nature of Registered Agant	4/19/2024	Date	
If signing on bel	half of an entity:			
	Asst Vice President			
ıy	rped or Printed Name * * * 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 (04/13)
CSC 411524-2