F19000000280

(Requestor's Name)			
(Address)	4003448		
(Address)			
(City/State/Zip/Phone #)	05/21/200:		
PICK-UP WAIT MAIL	USF21729==0,		
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
Office Use Only			



868584

1023--022 **35.00

KAROICHS

JUN 1 1 2020 I ALBRITTON



CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: May 15, 2020

Order#: 295172-004

Re: MILLER JONES, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

 \overline{XX} Check in the amount of \$35.

Please take the following action:

 \underline{XX} File in your office on a routine basis.

XX Issue Proof of Filing.

 \overline{XX} Please return evidence to the following:

Attn: Erika Zavala Daza c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

 \underline{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 ange is submitted for a corporat	tion organized under the law	vs of the State of $\overline{\Sigma}$	<u> </u>		
	r to change its registered office	•	h, in the State of Fic	rida.		
1. The name of t	the corporation: MILLER JONE	S OF TEXAS, INC.				
2. The principal office address: 5930 LBJ FREEWAY, #401, DALLAS, TX 75240						
3. The mailing a	ddress (if different):					
4. Date of incorp	e of incorporation/qualification: 01/15/2019 Document number: F19000000280					
5. The name and	d street address of the current re trment of State: (If resigned, en	egistered agent and registere	d office on file with	ı the		
	REGISTERED AGENTS, IN	C		Ji.		
	7901 4TH STREET NORTH	SUITE 300	·	7020 TEX 21		
	ST.PETERSBURG, FL 3370	02		2.7		
6. The name and (if changed):	d street address of the new regis	stered agent (if changed) and	d /or registered offic			
	Corporation Service Compa	ny		. <u>~</u>		
	1201 Hays Street					
	P.O. Box NOT acceptable					
	Tallahassee	FL	32301			
	ess of its registered office and be identical.					
authorized by the	as authorized by resolution du ne board, or the corporation ha	ity adopted by its board of c as been notified in writing (directors or by an o of the change.	fficer so		
90h	MoHer	John Moffett		President		
	re of an office or director	_	ed or typed name and little	:		
I further agree of my duties, and document is being corporation has	the appdintment as registered to comply with the provisions to I am familiar with and acceing filed merely to reflect a chief been notified in writing of the Service Company	of all statutes relative to the opt the obligation of my pos ange in the registered offic	e proper and comp ition as registered	agent. Or. if this		
Mare 2-Kubi. 05/15/2020		5/15/2020				
	mature of Registered Agent		Date			
If signing on be	half of an entity:					
Grace E. Kirby,	Asst. Vice President					
T	yped or Printed Name					

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