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(Requestor's Name)						
(Äddress)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	06/27/2019	_					
Name:_	Joy Weave	er					
Referen	rce #: 11003	60					
Entity N	Entity Name: GRIOT'S GARAGE, INC.						
	Articles of Incorporation/A						
☐ Amendment							
7	Change of Agent						
F	Reinstatement						
	Conversion						
	Merger Merger						
	☐ Dissolution/Withdrawal						
F	Fictitious Name						
	Other						
Authori	zed Amount:	\$35.00	- 				
Signatu	re: Allau	<u>ч </u>					

F: 800.944.6607

F: +852.2682.9790

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

statement of cha	inge is submitted for	a corporation organize	607.1508, or 617.1508, Flo ed under the laws of the Sta ed agent, or both, in the Sta	nte of Washin			
1. The name of	The name of the corporation: GRIOT'S GARAGE, INC.						
	office address: No						
3. The mailing a	nddress (if different):						
4. Date of incor	poration/qualificatio	_{n:} March 12, 201	Document number:	F1900000)1180	<u> </u>	
		e current registered age esigned, enter resigned)	nt and registered office on	file with the			
	Corp	oration Service	ce Company				
		1201 Hays S	Street	 일본	2019		
	Talla	ahassee, FL	32301-2525		2019 JUN 27		
6. The name and (if changed):	d street address of th	e new registered agent ((if changed) and /or registe	red office 5/50	AM	7.00	
	COGENCY	GLOBAL INC	<u>C.</u>	ZT	ö		
	115 North	Calhoun St., S		ं नी	23		
	Tallahasse	e, FL 32301	ceptage				
The street addr	ess of its registered	office and the street ad	dress of the business offic	e of its registere	d agent	t,	
Such change was authorized by the	as authorized by reshe board, or the corp	olution duly adopted be poration has been notified	y its board of directors or ied in writing of the chang	by an officer so			
Nava I	are of an officer or director		CONTROLLER DIRE	CTOR - BRYAN	u Ber	さいいくえ	
-	,		agree to act in this capacit is relative to the proper ar ept the obligation of my po a change in the registere writing of this change.				
N	<u> </u>		6/26/2019				
Sig	gnature of Registered Agent	-	Date				
If signing on be	chalf of an entity:						

Timothy Mayville, Assistant Secretary

Typed or Printed Name

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