

(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 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Matthew Ermak matthew.ermak@cscglobal.com

Date: October 24, 2019

Order#: 011780-002

Re: LOCK-N-STITCH INC.

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: Matthew Ermak 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

		02, 617.0502, 607.1508, or 617.1508, Florida Stration organized under the laws of the State of $ extstyle C$	
in orde	er to change its registered offi	ce or registered agent, or both, in the State of Fl	orida,
1. The name of	the corporation: LOCK-N-STI	TCH INC.	
		ERQUIST RD, TURLOCK, CA 95380	-
3. The mailing	address (if different):		
4. Date of incor	poration/qualification: 05/24/	/2019 Document number: F1900000	2451
5. The name an		registered agent and registered office on file with	
	C T CORPORATION SYST	ЕМ	
	1200 SOUTH PINE ISLAND) RD	_
	PLANTATION	FL 33324	
6. The name an (if changed):	***	gistered agent (if changed) and /or registered offic	
	Corporation Service Compa	nny	<u>.</u> . بب
	1201 Hays Street		ა თ
		P.O. Box/NOT acceptable	
	Tallahassee	FL 32301	
The street addr as changed will	ess of its registered office and I be identical.	d the street address of the business office of its	registered agent.
Such change w authorized by t	as authorized by resolution d he board, or the corporation h	uly adopted by its board of directors or by an of as been notified in writing of the change.	ficer so
	Ju & almi	Jill Cilmi, Vice President	
I hereby accept I further agree performance of agent. Or, if th hereby confirm	uiget an officer of director I the appointment as registere to comply with the provisions I my duties, and I am familiar his document is being filed me that the corporation has bee, on Service Company	Printed or typed name and title or diggent and agree to act in this capacity, is of all statutes relative to the proper and comp. with and accept the obligation of my position a crely to reflect a change in the registered office in notified in writing of this change.	lete is registered address, I
By: χ	Ince to Kubi	10/18/2019	
Sig	gnature of Registered Agenk	Date	
If signing on be	chalf of an entity:		
Grace E. Kirby	, Asst. Vice President		
1	'yped or Printed Name		

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