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S TALL FAIT

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NOV 2 7 2018

REGISTERED AGENT CHANGE THE MEN'S WEARHOUSE, INC.

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Help

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

statement of cha	nge is submitted for a corporatio	617,0502, 607,1508, or 617,1508, Florida Stan in organized under the laws of the State of <u>TX</u> r registered agent, or both, in the State of Flori			
		ouse, Inc.			
2. The minutest	6100 STEVENSO	N BOULEVARD FREMONT, CA 94538	_		
z. The principal	office address.				
3. The mailing a	ddress (if different):				
4. Date of incorp	ooration/qualification: 12/15/1992	Document number: F9200000098	4		
	street address of the current regi tment of State: (If resigned, enter	stered agent and registered office on file with the resigned)	ીર		
	CORPORATION SERVICE COM	IPANY			
	1201 HAYS STREET TALLAHA	ASSEE, FL 32301-2525	19.7 mar.	<u></u>	
			بر. مرابع	NO NO	77
6. The name and (if changed):		red agent (if changed) and /or registered office	2000年	NOV 26 AM	
	C.T. Corporation System			ූ	ب
	e-o CT Corporation System, 1200	South Pine Island Road	7	GD.	
		Box NOT acceptable			
	Plantation, Florida 33324				
The street address changed will	ess of its registered office and the be identical.	e street address of the business office of its reg	gistered a	हत्या.	
Such change wa authorized by th	is authorized by resolution duly a be board, or the corporation has l	adopted by its board of directors or by an offic been notified in writing of the change.	er so		
_ P Be	longer	Patricia Belanger: Vice President Printed of typed time and title			
	\sim	Printed or typed same and title gent and agree to act in this capacity.			
- I furthér agrée : - performance of - agém - Or - if th	to comply with the provisions of my duties and Lam familiar wit	all statutes relative to the proper and complet th and accept the obligation of my position as i s to reflect a change in the registered office of	いいひきくだんという	d.	
C'f' Cor By:	poration System	F1/16/2018			
Six	nature of Resplicied Agent	Ржс			
If signing on be	half of an entity:				
	mes M. Halpin				
	ssistant Secretary yood or Printed Name	_			

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

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Bon 6327, Tallahassef, FL 32314 CR2E045 (03/12)