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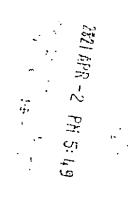
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Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		





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O STMMONS MAY 20 2021



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: March 31, 2021

Order#: 729266-012

Re: BRUNDAGE MANAGEMENT COMPANY, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35 .

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: Erika Zavala Daza 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

statement of cha	ange is submitted for a corporation or	0502, 607,1508, or 617,1508, Florida Sta ganized under the laws of the State of \overline{TX} gistered agent, or both, in the State of Flor	(
1. The name of	the corporation: BRUNDAGE MANAG	GEMENT COMPANY, INC.	
2. The principal	office address:R LN., SAN ANTONIO TX 78201		
3. The mailing a	nddress (if different):		
4. Date of incor	poration/qualification: 07/18/1994	Document number; F9400000	3727
	d street address of the current registere rtment of State: (If resigned, enter resi	ed agent and registered office on file with gned)	the
	KELLY, PETER J		
	100 SOUTH ASHLEY DR STE 130	00	ti 13 + 2 Chris E Trius
	ТАМРА	FL 33602	20 MB - 2
6. The name and (if changed):	d street address of the new registered a	agent (if changed) and /or registered office	-2 PH
	Corporation Service Company		ت تا
	1201 Hays Street		و ا
	P.O	Box NOT acceptable	
	Tallahassee	FL 32301	
The street address changed will	ess of its registered office and the stre be identical.	eet address of the business office of its re	egistered agent,
Such change wa authorized by th	as authorized by resolution duly ador he board, or the corporation has been	oted by its board of directors or by an off notified in writing of the change.	ficer so
	Sin e cioni	Jill Cilmi	
Signatu	re of an officer or director	Printed or typed name and title	
l further agrée of my duties, an document is bei corporation has	the appointment as registered agent to comply with the provisions of all s ad I am familiar with and accept the d ing filed merely to reflect a change in s been notified in writing of this chan n Service Company	and agree to act in this capacity. tatutes relative to the proper and complobligation of my position as registered a the registered office address, I hereby o ge.	ete performanc gent. Or, if this Sonfirm that the
	2-Kuby	03/29/2021	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
·	Asst. Vice President		
T	yped 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)