F940000505074

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



900315729789

07/46/48--01025--015 **35.00

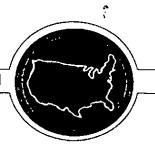
MILAHASSE F STATE

UUL 17 2018 T. LEWIEUK



National Resident Agent Service Incorporated

May 15, 2018



National Retail Systems, Inc. Attn: Mr. William Cluver 2820 16th Street North Bergen, NJ 07047

Dear Sir or Madam:

Your company is currently using our service to designate a Registered Agent for your corporation in the State of Florida. Our current agent, Theresa O'Brien, has changed her address.

Enclosed please find a Statement of change of registered office or registered agent, or both which is required to be filed to change the agent's address.

Your signature is required on the form before it can be filed with Secretary of State. Please complete and sign the form, forward it directly to the State of Florida with the \$35.00 fee.

If you have any questions, please feel free to contact our office.

Sincerely, NATIONAL RESIDENT AGENT SERVICE, INC. Margaret Hagan Margaret Hagan

Enclosure

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

statement of cha	provisions of sections 607.0502, 617 mge is submitted for a corporation o r to change its registered office or r	organized under the laws of the Stat	e of Massachusetts
1. The name of i	office address: 2820-16th	Fraight Corp	1020 NJ 07
2. 118 timbioai	onica address, . g. <u>. g g</u>	<u> </u>	
3. The mailing a	ddress (If different):		
4. Date of incon	ecoration/qualification: 2/25/19	8 Document number:	
	l street address of the current registe tmeat of State: (If resigned, enter re	——————————————————————————————————————	ile with the
	Theresa O'Brien		
	20244 Melville St.		
	Orlando, FL 32833		<u>-</u>
6. The name and (if changed):	l street address of the new registered	i agent (if changed) and /or registere	ed office
	Theresa O'Brien		7A 21
	47 S. Hamilton Sprin		
	St. Augustine, FL 32	x NOT acceptable	ASSEK LIP
ea changea will			의 # 보 # # # # # # # # # # # # # # # # # # #
Such change we authorized by the	is authorized by resolution duly add to hoard, or the corporation has been	opted by its board of directors or bein notified in writing of the change	y En officenso
Signati	Hadrana - vacant	Printed or typed name	And tile
perjormance of asent. Or if thi	the appointment as registered ages to comply with the provisions of all my duties, and I am familiar with a is document is being filed merely to that the corporation has been notif	ma accept the obligation of my poi reflect a change in the registered	l complete sition as registered office address, l
1 heres	an C DEMOCIA	5/21/15 DAM	3
If signing on be	half of an ontity:		
т,	yped or Printed Name		

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