(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Document Number)			
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R. While



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Mary Rivers mary.rivers@cscglobal.com

Date: April 11, 2016

Order#: 096992-008

Re: M.G. DYESS, 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: Mary Rivers

c/o Corporation Service Company 2711 Centerville Road, Suite 400

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 ch	ange is submitted for a corporat	2, 617.0502, 607.1508, or 617.1508, Florida S ion organized under the laws of the State of <u>N</u> or registered agent, or both, in the State of Fi	Mississippi	
1. The name of	the corporation: M. G. DYESS I	NC.		
2. The principa	l office address: 7159 Hwy 35 S	outh, Bassfield, MS 39421		
3. The mailing	address (if different): PO BOX 5	20, Bassfield, MS 39421		
4. Date of incor	poration/qualification: 09/27/19	Document number: F9600000	)4981	
5. The name and		gistered agent and registered office on file with		
	C T Corporation System			
	1200 South Pine Island Road			
	Plantation	FL 33324	16 APR SECRU	
6. The name and (if changed):	d street address of the new regist	ered agent (if changed) and /or registered office	e San J	;
	Corporation Service Company	·	AM II:	4
	1201 Hays Street			
	P.O	). Box NOT acceptable	<b>3</b>	
	Tallahassee	FL 32301		
The street addre	ess of its registered office and the identical.	ne street address of the business office of its r	registered agent,	
Such change wa authorized by th	as authorized by resolution duly be board, or the corporation has	adopted by its board of directors or by an of been notified in writing of the change.	ficer so	
C la	l'a Lista	Claudia G. Santos	Asst. Secretary	
Signatu	re of an officer or director	Printed or typed name and title		
igeni. Or, ij ini hereby confirm	s aocument is being filea meret	ngent and agree to act in this capacity. I all statutes relative to the proper and compl th and accept the obligation of my position a ly to reflect a change in the registered office of otified in writing of this change.	ete s registered address, I	
By: X)ro	ice Cokubil	04/08/2016		
Sign	nature of Registered Agent	Date		
f signing on bel	nalf of an entity:			
Grace E. Kirby,	Assistant Vice President			
Ту	ped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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