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· (Re	equestor's Name)			
(Ac	idress)			
(Ac	ddress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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2016 JAN 26 PM 2: 25



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: January 22, 2016

Order#: 943942/007

Re: CUTNAIL RACING, 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 Return Regular Mail in the enclosed envelope.

Attn:Lindsey Lockard

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

Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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

•	•	02, 617.0502, 607.1508, or 617.1508, Florid			
•		ation organized under the laws of the State se or registered agent, or both, in the State (•		
	3 3		oj Pioriaa.		
1. The name of t	he corporation: CUTNAIL RA	CING, INC.			
2. The principal	office address:				
301 E. Las C	Dias Blvd., Fort Lauderdale, F	L 33301			
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 09/25/	1984 Document number: H226	69		
5. The name and		registered agent and registered office on file			
	Esposito, Robert - Stiles Corporation				
	301 E. Las Olas Blvd.		22.25		
	Fort Lauderdale	FL 33301	—————————————————————————————————————		
6. The name and (if changed):	street address of the new regi	istered agent (if changed) and /or registered	l office		
	Corporation Service Compar	ny			
	1201 Hays Street				
	P.O. Box NOT acceptable				
	Tallahassee	FL 32301			
The street addre	ess of its registered office and be identical.	the street address of the business office o	f its registered agent,		
Such change wa authorized by th	s authorized by resolution du e board, or the corporation has	aly adopted by its board of directors or by as been notified in writing of the change.	an officer so		
To	8 >	Dona Priebe	Vice President		
Signatur	re of an officer or director	Printed or typed name and	d title		
I further agree t performance of agent. Or, if thi hereby confirm	o comply with the provisions my duties, and I am familiar is document is being filed me	d agent and agree to act in this capacity. of all statutes relative to the proper and c with and accept the obligation of my posit rely to reflect a change in the registered o notified in writing of this change.	lion as registered		
By: Drac	e Cokuble	01/15/2016			
Sign	nature of Registered Ageogt	Date	· - · ·		
If signing on bel	half of an entity:				
Grace E. Kirby,	Assistant Vice President				
Ту	ped or Printed Name				

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