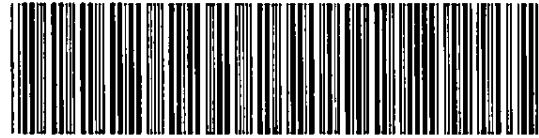


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key
7001 Interbay Blvd
#246
Tampa FL 33616

(City/State/Zip/Phone #)

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(Business Entity Name)

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of OH.O in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Serving Beyond Borders
2. The principal office address: 252 S. Alling Rd Tallmadge, OH 44278
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/1/2015 Document number: NI4000011261
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

MRS Alisha M. Ley
5813 Legacy Crescent Pl #301
Riverside FL 33578

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Mrs Alisha M. Ley
7001 Interbay Blvd Unit 246
Tampa FL 33616

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Douglas Ley
Signature of an officer or director

Douglas Ley - President
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Alisha M. Ley
Signature of Registered Agent

9/14/17
Date

If signing on behalf of an entity:

Alisha M. Ley
Typed 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

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