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| PICK-UP | ☐ WAIT | MAIL |
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| (Business Entity Name) | | |
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| Certified Copies | _ Certificate: | s of Status |
| Special Instructions to Filing Officer: | | |
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SECRETARY OF STATES
TALLAHASSEE, ELORIDA

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T. LEMIEUX





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

| restrictions of sections 607:0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this stitutement of change is submitted for a corporation organized under the laws of the State of Florida. |
|--|
| in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: Mrs. C/can, Inc. |
| 2. The principal office address: 3810 6 Dr M dr Dr. |
| 5aytora, FL 3273 |
| 3. The mailing address (if different): |
| |
| 4. Date of incorporation/qualification: 8 24 2000 Document number: P0000081713 |
| 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) |
| David Allen |
| 3810 5, Octobro Dr |
| Sanford, FL 32173 |
| |
| 6. The name and street address of the new registered agent (if changed) and /or registered office. |
| Woo Hwang |
| 3810 S. Ortando Dr |
| P.O. Box NOT acceptable |
| Jan 10rd FL 32173 |
| 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. |
| Woo Hwang Signature of an officer or greetor Woo Hwang 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. |
| Woo Awan 3-16-2017 Signature of Registred Agent Date |
| Signature of Registered Agent Date |
| If signing on behalf of an entity: |
| Woo Hwang Typed 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 * * *