(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Dusiliess Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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09/07/18--01024--020 **35.00

Ra changed
09/14/18



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Baronie lindsey.baronie@cscglobal.com

Date: September 5, 2018

Order#: 348747/004

Re: APPLE EXPRESS COURIER, 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.

(X Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Lindsey Baronie c/o Corporation Service Company 251 Little Falls Drive 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

statement of cha	unge is submitted for a corpora	2, 617.0502 , 607.1508 , or 617.1508 , Floric tion organized under the laws of the State ϕ or registered agent, or both, in the State ϕ	of FL	
1. The name of (the corporation: APPLE EXPRE	ESS COURIER, INC.		
2. The principal	office address:	.W. 84TH AVENUE DORAL FL 33126		
3. The mailing a	iddress (if different): 5300 Sate	ellite Drive, Mississauga, ON L4W 5-J2 CA	4	
4. Date of incorp	poration/qualification: 12/29/20	Document number: P0400	00173221	
	I street address of the current re tment of State: (If resigned, ent	egistered agent and registered office on file ter resigned)	with the	
	CORPORATE CREATIONS	NETWORK INC.	_	
	11380 PROSPERITY FARMS ROAD #221E			
	PALM BEACH GARDENS	FL 33410	2018 SEP SECRET	
6. The name and (if changed):	I street address of the new regis Corporation Service Company	stered agent (if changed) and /or registered	offinal -1	
		y	AN IO: 47	
	1201 Hays Street	O, Box NOT acceptable	_ [# 4	
	Tallahassee	FL 32301	_	
The street addre	ess of its registered office and t be identical.	the street address of the business office of	its registered agent.	
Such change wa	s authorized by resolution duly the board, or the corporation has	y adopted by its board of directors or by a s been notified in writing of the change.	n officer so	
<u> </u>	e E. Cionie	Jill Cilmi	Vice President	
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	o comply with the provisions o my duties, and I am familiar w s document is being filed mere	Printed or typed name and agent and agree to act in this capacity of all statutes relative to the proper and cay with and accept the obligation of my positive to reflect a change in the registered of notified in writing of this change.	omplete on as registered	
By: Linds	ry M. Baronie	08/30/2018		
	nalf of an entity:	· · · ·		
	onie, Asst. Vice President			
Ty	ped or Printed Name			

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