P1300000 9980

(Re	questor's Name)			
(Ad	dress)			
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(Cit	y/State/Zip/Phone	<u>₩</u>		
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PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Name	e)		
		.=		
(Document Number)				
Certified Copies	Certificates	of Status		
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Special Instructions to	Filing Officer:			
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Office Use Only



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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: May 25, 2016

Order#: 146296/040

Re: NET PROFIT, 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:Mary Rivers 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

statement of che	provisions of sections 607.0302, 617.03 unge is submitted for a corporation orga	mized under the lo	aws of the State of FLC	ORIDA	
	er to change its registered office or regis	stered agent, or bo	oth, in the State of Flor	ida.	
1. The name of	the corporation: NET PROFIT, INC.				
2. The principal	office address: 525 S. FLAGLER DRIV	E, UNIT 18B, WE	ST PALM BEACH, FL	. 33401	
					
3. The mailing a	address (if different):	<u> </u>			
4. Date of incor	poration/qualification: 01/28/2013	Document	number; P130000099	980	
	d street address of the current registered rtment of State: (If resigned, enter resign		ed office on file with t	he	
	FUSEFORM, INC.				
	9838 OLD BAYMEADOWS ROAD		135 21 131 21 131		
	JACKSONVILLE	FL	32256	2 7	
6. The name and (if changed):	I street address of the new registered age	ent (if changed) an	d /or registered office	A = 0	
	Corporation Service Company		····································	<u>بد</u>	
	1201 Hays Street				
P.O. Box NOT acceptable					
	Tallahassee	FL.	32301		
	ss of its registered office and the street be identical. s authorized by resolution duly adopted board or the corporation has been no				
authorized by th	o board or the corporation has been no	tified in writing o	of the change.		
14	/ John	Carl S	Jeckey, President		
I hereby accept in the second	the appointment as registered agent an o comply with the provisions of all stat my duties, and I am familiar with and a s document is being filed merely to refl that the corporation has been notified in Service Company	Printe d agree to act in t utes relative to th iccept the obligati ect a change in th n writing of this c	d or typed name and title this capacity. e proper and complete ion of my position as r ie regislered office add change.	; egistered dress, I	
By: Y					
—Sign If signing on bel	•		Date		
	Assistant Vice President				
	ped or Printed Name				
	* * * FILING FE	E: \$35.00 * * *			

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