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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 : (888)705-7274 : (888)706-7274 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:___

REGISTERED AGENT CHANGE CHILLI MARKETING USA CORP.

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A. BUTLER
JUN 211 2022

COVER LETTER

TO: Amendment Section Division of Corporations

15129570210

CHILLI MARKETING USA CORP. Name of Corporation P13000020963 DOCUMENT NUMBER: The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Joshua Murphy Name of Contact Person Registered Agent Solutions, Inc. Firm/Company Corporate Center One, 5301 Southwest Pkwy, Ste 400 Address Austin, Texas 78735 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Joshua Murphy Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Street Address: Mailing Address: Amendment Section Amendment Section **Division of Corporations** Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

P.O. Box 6327

Tailahassee, FL 32314

15129570210

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

•	provisions of sections 607.0502, 617. inge is submitted for a corporation or					
= = = = = = = = = = = = = = = = = = =	r to change its registered office or re					
1. The name of t	the corporation: CHILLI MARKE	TING L	ISA CO	RP.		
	office address: 428 Broadway				0013	
	iddress (if different): 4270 Promer					2
4. Date of incorp	poration/qualification: 3/5/2013		Document	number: <u>P1300</u>	00020963	-
	I street address of the current register rtment of State: (If resigned, enter res		nd registere	ed office on file w	vith the	
	BLUMBERGEXCELSIOR CO	ORPORA	ATE SER	VICES, INC.	_ : 70	
	155 OFFICE PLAZA DRIVE		1ST I	FLOOR	TAN	
	TALLAHASSEE		FL	32301	2022 JUN 17 SEGRETAR	ATTE
6. The name and (if changed):	d street address of the new registered			d /or registered of		I.I.
	Registered Agent Solut	tions, I	nc.		22 門形	
	155 Office Plaza Dr.	S	uite A		_	
	Tallahassee), Box NOT a FL	3230	1		
		· -		<u> </u>	_	
The street addre as changed will	ess of its registered office and the str be identical.	reet addres	s of the bu	isiness office of i	its registered agent,	
Such change wa authorized by th	as authorized by resolution duly ado ne board, or the corporation has been	pted by its n notified	board of a	directors or by ar of the change.	n officer so	
⊌ Garetl	h Whittle	Gare	th Whit		President	
I hereby accept I further agree t of my duties, an document is bei	the appointment as registered agen to comply with the provisions of all d I am familiar with and accept the ng filed merely to reflect a change is s been notified in writing of this chai	statuteš re obligation n the regi:	e to act in lative to the of my pos	ie proper and con tition as registere	mplete performance ed avent. Or. if this	•
Modean	zindt	06	/17/2022	2		
Sign	nature of Registered Agent			Date	12.12112.2212.22	
If signing on be	half of an entity:					
	Assistant Secretary					
r 3	yped or Printed Name		F 00 + + +			