

P16000087060

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

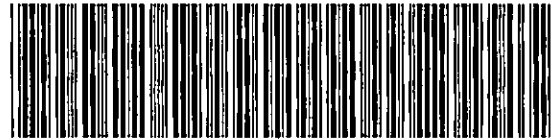
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C. GOLDEN

AUG - 3 2017



CSC - WILMINGTON  
251 Little Falls Drive  
Wilmington De 19808

800-927-9800  
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS  
From: Anthony Holmes      anthony.holmes@cscglobal.com  
Date: July 25, 2017  
Order#: 739525/017  
Re: TWO BULLS ARMAMENTS 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:Anthony Holmes  
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

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: TWO BULLS ARMAMENTS INC.
2. The principal office address: 1002 E Newport Center Dr., 200, Deerfield Beach, FL 33442
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 10/27/2016 Document number: P16000087060

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)

Cohen, Bradley

1002 E. Newport Center Dr, 200

Deerfield Beach, FL 33442

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

Corporation Service Company

1201 Hays Street

P.O. Box NOT acceptable

Tallahassee

FL 32301

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.

\_\_\_\_\_  
Signature of an officer or director

BETH COHEN

\_\_\_\_\_  
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.*

Corporation Service Company

By: Grace E. Kirby

\_\_\_\_\_  
Signature of Registered Agent

07/25/2017

\_\_\_\_\_  
Date

If signing on behalf of an entity:

Grace E. Kirby, Asst. Vice President

\_\_\_\_\_  
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

CR2E045 (03/12)