3/29/2018





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To:

Division of Corporations

Fax Number : (850)617-6380

R. WHITE

Account Name : REGISTERED AGENTS INC.

MAR 3 0 2018

Account Number : I20090000081 Phone : (307)200-2803 : (855)330-1010 Fax Number

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

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## REGISTERED AGENT CHANGE SILVERCORP USA INC

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

		507.1508, or 617.1508, Florida Statutes, the		
	e is submitted for a corporation organized o change its registered office or registered	d under the laws of the State of Florida  I usent, or both, in the State of Florida		
	corporation: SILVERCORP USA INC			
MELBOURNE,	fice address: 1450 DOW RD STE 104			
3. The mailing add	ress (if different):			
4. Date of incorpor	ation/qualification: 02/26/2018	Document number: P18000019267		
5. The name and si Florida Departm	reet address of the current registered agent ent of State: (If resigned, enter resigned)	t and registered office on file with the		
<u>R</u>	ILEY, FRANK			
3	658 HOLLISTEN CIR		Fi	
<u>M</u>	ELBOURNE, FL, FL 32940			8 HAR
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		٠.	R 29	
<u>R</u>	egistered Agents Inc.			Ā
3	030 N. Rocky Point Dr. STE 150A			89 —
<u>T</u>	P.O. Box NOT accep ampa FL 33607	ptable	.4.1	+-
The street address as changed will be	of its registered office and the street addition	ress of the business office of its registered	agent,	
Such change was a	outhorized by resolution duly adopted by board, or the corporation has been notified	its board of directors or by an officer so din writing of the change.		
J.	_/\	ordan Goudreau CEO		
4	t an officer or director  the appointment as registered agent and agenomply with the provisions of all statutes the duties, and I am familiar with and acceptocument is being filed merely to reflect a the corporation has been notified in wr	Printed or typed name and title  tree to act in this capacity, relative to the proper and complete of the obligation of my position as register a change in the registered office address, riting of this change.	ed	
Bee Home		3/28/18		
Signatu	re of Registered Agent	Date		
If signing on behal	f of an entity:			
BIII Havre				
Турес	or Printed Name			
* * * FILING FEE: \$35.00 * * *				
MAIL CR2E045 (03/12)	MAKE CHECKS PAYABLE TO FLORIDA TO: DIVISION OF CORPORATIONS, P.O. B	A DEPARTMENT OF STATE BOX 6327, TALLAHASSEE, FL 32314		