## P28635

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

Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Logan Hall logan.hall@cscqlobal.com

Date: November 6, 2018

Order#: 462299-009

Re: MOORS & CABOT, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.

XX \_\_ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Logan Hall

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	unge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of MA registered agent, or both, in the State of Florida.	
1. The name of	the corporation: MOORS & CABOT	T, INC.	<del></del>
2. The principal	office address: 111 DEVONSHIRE	E STREET BUSTON MA 02109	<del></del>
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 03/27/1990	Document number: P28635	
	d street address of the current regist rtment of State: (If resigned, enter r	tered agent and registered office on file with the resigned)	
	Dorval, ANTHONY EXEC VP. bR	RANCH mGR _: 😕	
	941 WEST MORSE BLVD SUITE	E 125 20 10 10 1	רת
	WINTER PARK	FL 32789	
6. The name and (if changed):	d street address of the new registere	ed agent (if changed) and /or registered office.	
	Corporation Service Company		
	1201 Hays Street		
		ox NOT acceptable	
	Tallahassee	FL 32301	
The street addreas changed will	ess of its registered office and the s be identical.	street address of the business office of its registered agent	t,
Such change wa authorized by th	as authorized by resolution duly ad ne board, or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.	
$X_{i}$	el P Court	Jill Cilmi, Vice President	
Significa	c of another or disease.	Printed or typed name and title	
l further agroe t performance of agent. Or, if thi hereby confirm	to comply with the provisions of al my duties, and I am familiar with :	ent and agree to act in this capacity. Il statutes relative to the proper and complete and accept the obligation of my position as registered to reflect a change in the registered office address, I ified in writing of this change.	
By: L) fr	ro Colo	11/05/2018	
	half of an entity:	Date	
Grace E. Kirby,	Assistant Vice President		
T.	and or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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