

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : TRENAM, KEMKER, SCHARF, BARKIN, FRYE, O'NEILL & MULLIS, P.A.
Account Number : 076424003301
Phone : (813) 223-7474
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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
IRVIN INTERNATIONAL INCORPORATED**

Certificate of Status	0
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8/22/18

AUG. 22. 2011 1:36PM

TRENAM KEMKER

NO. 2685 P. 2

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT ((H11000208779 3)))
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: Irvin International Incorporated
2. The principal office address: 8105 Krauss Boulevard, Suite 102, Tampa, FL 33619
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 1/19/95 Document number: P95000004717

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)

Nelson T. Castellano

101 E. Kennedy Boulevard, Suite 2700

Tampa, Florida 33602

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

TK Registered Agent, Inc.

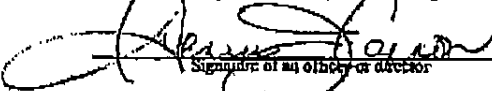
101 E. Kennedy Boulevard, Suite 2700

P.O. Box NOT acceptable

Tampa, Florida 33602

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

Denise I. Cannon, President

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.

TK Registered Agent, Inc.

By: 

Signature of Registered Agent

8-22-11

Date

If signing on behalf of an entity:

Nelson T. Castellano

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

CR25043 (8/05)

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