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To:

Division of Corporations

Fax Number

Fax Number

: (850)617-6380

: (407)425-2747

From:

:120

Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.

Account Number : I19990000006 Phone : (407)425-7010

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

Email Address: Corporate@zkslawfirm.com

REGISTERED AGENT CHANGE RICHCO PROPERTIES (FLORIDA), INC.

Certificate of Status	0
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Corporate Filing Menu

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COVER LETTER

TO:	Amendment Section Division of Corporations			
	ECT: RICHCO PROPERTIES (FLORIDA), IN of Corporation	C.		. .
DOC	UMENT NUMBER: P96000044815			_
	nclosed Statement of Change of Registered C	Office/Agent and fee	are submitted for	r filing.
Please	return all correspondence concerning this m	atter to the following	ng:	
				•
N. Dw	ayne Gray, Jr., Esquire			
Name	of Contact Person			
Zimm	erman, Kiser & Sutcliffe, P. A.			
Firm/	Company		•	
315 E	Robinson Street, Suite 600			
Addre	SS			
Orland	Io, Florida 32801			,
City/S	State and Zip Code		,	
-	corporate@zkslawfirm.com			
E-ma	il address: (to be used for future annual re	eport notification)		-
	•	,		•
For fu	rther information concerning this matter, ple	ase call:	,	٠
Barbio	A. Blandina, Corporat eParale gl	at (⁴⁰⁷	425-7010	
	Name of Contact Person	Area Co	de & Daytime Te	lephone Number
Enclo	sed is a \$35.00 check made payable to the D	epartment of State.		
	Mailing Address:	Street Addres	<u>s:</u>	

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

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

Pursuant to the provisions of sections 607.0502, 617.0. statement of change is submitted for a corporation org in order to change its registered office or regi	anized under the laws of the State of FLORIDA			
I. The name of the corporation: RICHCO PROPERTIES	S (FLORIDA), INC.			
2. The principal office address: 245 EGLINTON AVEN	UE EAST, SUITE 400			
TORONTO, ON M4P 3B7 CA	· · · · · · · · · · · · · · · · · · ·			
• • • — —				
4. Date of incorporation/qualification: 05/23/1996	Document number: P96000044815			
5. The name and street address of the current registered Florida Department of State: (If resigned, enter resigned)				
THE MARSTEL CORPORATION				
2615 S UNIVERSITY DR				
DAVIE, FL 33328	2020			
6. The name and street address of the new registered at (if changed):	gent (if changed) and /or registered office			
N. DWAYNE GRAY, JR., ESQUIRE				
315 E ROBINSON ST., STE 600	Box NOT acceptable 32			
	Box NOT acceptable			
ORLANDO, FL 32801				
The street address of its registered office and the streas changed will be identical.	eet address of the business office of its registered agent,			
Such change was authorized by resolution duly adop authorized by the board, or the corporation has been	oted by its board of directors or by an officer so notified in writing of the change.			
RICHARD COHEN, PRESIDENT/DIRECTOR				
	Pinied or types name and tale and agree to act in this capacity. Intuites relative to the proper and complete performance obligation of my position as registered agent. Or, if this I the registered office address, I hereby confirm that the ge.			
n. Dwg. Dy. g	10/19/2020			
If signing on behalf of an entity:	Date .			
Typed or Printed Name				
* * * FILING	FEE: \$35.00 * * *			
	FLORIDA DEPARTMENT OF STATE , P.O. BOX 6327, TALLAHASSEE, FL 32314			

CR2E045 (04/13)