V02503

(Re	questor's Name)	
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CSC - WILMINGTON Suite 400 2711 Centerville Road Wilmington De 19808 800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Tecora Bell tecora.bell@cscglobal.com

Date: April 4, 2017

Order#: 565816/042

Re: NEWPORT GROUP SECURITIES, 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:Tecora Bell c/o Corporation Service Company 2711 Centerville Road, Suite 400 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

statement of cha	ange is submitted for a corporation orga	, ,	
		stered agent, or both, in the State of Florida.	
1. The name of	the corporation: NEWPORT GROUP SE	ECORITIES, INC.	
2. The principal	office address: 300 INTERNATIONAL F	PARKWAY SUITE 270 HEATHROW, FL 32746	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 12/23/1991	Document number: V02503	
5. The name and		agent and registered office on file with the	
	MELZER, MENDEL		
	300 INTERNATIONAL PARKWAY SL	JITE 270	
	HEATHROW, FL 32746-5028		
6. The name and (if changed):	d street address of the new registered age	ent (if changed) and /or registered office	DIVISION
	Corporation Service Company	-6 c	AR
	1201 Hays Street	AN	수 다
	P.O. Box NO	T'acceptable	5
	Tallahassee	FL 32301	1.
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its registered agent	,
Such change was authorized by	as authorized by resolution duly adopted board, or the corporation has been no	d by its board of directors or by an officer so otified in writing of the change.	
	Sie & agrie	Jill Cilmi, Vice President	
Signatu	e of an officer or director	Printed or typed name and title	
I further agree to performance of agent. Or, if the hereby confirm	'mv duties, and I am familiar with and a	tutes relative to the proper and complete accept the obligation of my position as registered lect a change in the registered office address. I	
By: Line	ice Cotuble	04/04/2017	
_	nature of Registered Agent	Date	
If signing on be	half of an entity:		
	Asst. Vice President		
Ty	ped or Printed Name		

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