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Division of Corporations

Fax Number

: (850)617-6380

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Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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REGISTERED AGENT CHANGE MCKINNEY REAL ESTATE GROUP, INC.

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

	he provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this		
	change is submitted for a corporation organized under the laws of the State of Florida		
in ora	rder to change its registered office or registered agent, or both, in the State of Florida.		
1. The name of	of the corporation: MCKINNEY REAL ESTATE GROUP, INC.		
2. The principa	pal office address: 1717 PENN AVE., STE. 5015, WILKINSBURG, PA 15221-2663		
3. The mailing	g address (if different):		
4. Date of inco	orporation/qualification: 01/23/1992 Document number: V09076		
5. The name an Florida Depart	and street address of the current registered agent and registered office on file with the partnent of State: (If resigned, enter resigned)		
	HCRM CORP.		
	2200 CORPORATE BLVD., N.W., STE. 401	19	
	BOCA RATON, FL 33431	APR	-
6. The name an (if changed):	and street address of the new registered agent (if changed) and for registered office :	9	:
	C T Corporation System C/o C T Corporation System. 1200 South Pine Island Road	ુ: ' ુ	
	c/o C T Corporation System, 1200 South Pine Island Road	ယ္ပ	
	P.O. Box NOT acceptable Plantation, Florida 33324		
	rianaton, rivilla 5.5524		
The street address changed will	ress of its registered office and the street address of the business office of its registered agent, Il be identical.		
Such change wa authorized by the	vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.		
΄ ζ	Topph Passale. Treasurer		
hereby accept	that could be desired the court of the court		
I further agree performance of agent. Or, if th hereby confirm	of the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and complete of any duties, and I am familiar with and accept the obligation of my position as registered this document is being filed merely to reflect a change in the registered office address, I at the corporation has been notified in writing of this change.		
C T Cor	exportation System Linda De all 4/9/19		
	gosture of Registered Agent Date		
	ehalf of an entity:		
	a Stauffer		
Assistan	nt Secretary		

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, Tallahassee, FL 32314
CR2E045 (03/12)