V37735

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



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JUN 2 8 2019



CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: June 14, 2019

Order#: 807756/010

Re: RANDE G., 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 Return Regular Mail in the enclosed envelope.

Attn:Ami Casper c/o Corporation Service Company 251 Little Falls Drive 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.

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HOUSE TO SHALL IN THE STATE OF STATE OF

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

| | DANDE O INO | | |
|---|---|---|---------------|
| | he corporation: RANDE G., INC. | | |
| 2. The principal of | | Boulevard, 11th Floor, Los Angeles, CA 90064 | |
| 3. The mailing ac | ddress (if different): | | |
| 4. Date of incorpo | oration/qualification: 05/20/1992 | Document number: V37735 | _ |
| 5. The name and: | | ered agent and registered office on file with the | |
| ! - | Cogency Global Inc. | | |
| | 115 North Calhoun Street, Suite | | |
| - | Tallahassee, FL 32301 | | |
| (if changed): | street address of the new registered | d agent (if changed) and /or registered office | |
| (| Corporation Service Company | | |
| • | 1201 Hays Street | | |
| _ | | x NOT acceptable | : <u></u> |
| _ | Tallahassee | FL 32301 | ß |
| | | treet address of the business office of its registered opted by its board of directors or by an officer so an notified in writing of the change. | lagent, |
| Ph | | Rande Gerber, President | |
| I hereby accept th I further agree to performance of m agent. Or, if this hereby confirm th | recomply with the provisions of all with a duties, and I am familiar with a | Printed or typed name and title nt and agree to act in this capacity. statutes relative to the proper and complete and accept the obligation of my position as register | ed I |
| By: Cli | mlei | 6/3/19 | |
| | ure of Registered Agent | Date | |
| f signing on beha | - | | |
| | sst. Vice President | | |

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