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(Re	equestor's Name)			
(Ad	dress)			
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(Cit	ty/State/Zip/Phone	e #)		
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(Bu	siness Entity Nan	ne)		
(Document Number)				
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UNISION OF CORPORATION

AUG 22 2016

C LEWIS



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby grace.kirby@cscglobal.com

Date: August 8, 2016

Order#: 206114-008

Re: AARGON AGENCY, 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 Please return evidence to the following:

Attn: Grace Kirby c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of ch	ange is submitted for a corport	02, 617.0502, 607.1508, or 617.1508, Florida Statute ation organized under the laws of the State of <u>Neva</u> se or registered agent, or both, in the State of Floride	da
1. The name of	the corporation:_AARGON AG	GENCY, INC.	
		Mountain Road, Las Vegas, NV 89117	
3. The mailing	address (if different):		
4. Date of incor	poration/qualification: 04/14/	2003 Document number: F0300000188	0
	d street address of the current r rtment of State: (If resigned, er	registered agent and registered office on file with the nter resigned)	
	Lexis Nexis Document Soluti	ions, Inc.	
	1201 Hays Street		2011 2011
	Tallahassee	FL 32301	SION OF THE
6. The name and (if changed):	d street address of the new regi	stered agent (if changed) and /or registered office	THE AUG 10 AH 8: 34
	Corporation Service Compan	<u> </u>	4
	1201 Hays Street		
	P Tallahassee	O. Box NOT acceptable FL 32301	
_		the street address of the business office of its regist	
authorized by th	ne board, or the corporation ha	s been notified in writing of the change.	30
Δ	1/1/4	Duane Christy, President	
I hereby accept I further agree to berformance of agent. Or, if thi hereby confirm	to comply with the provisions of my duties, and I am familiar w is document is being filed mere	Printed or typed name and title agent and agree to act in this capacity. of all statutes relative to the proper and complete with and accept the obligation of my position as reg ely to reflect a change in the registered office addre notified in writing of this change.	istered ess, I
By Clayabe	Advantage of Registered Agent	02/26/2016	
_		Date	
•	half of an entity: wson, Asst. Vice President		
	rped or Printed Name	_	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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