F000000000178

uestor's Name)				
ress)				
ress)				
/State/Zip/Phon	e #)			
☐ WAIT	MAIL			
iness Entity Nar	me)			
(Document Number)				
Certificates	s of Status			
Special Instructions to Filing Officer:				
	ress) /State/Zip/Phone WAIT iness Entity Nare cument Number)			

Office Use Only



900254776309

12/30/13--01037--002 **35.00

13 DEC 30 AH II: 16

RA RO 1018 (10 12/31/13



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Morgan Kennedy

Date: December 24, 2013

Order#: 920604-080

Re: MAIL BOX STORES 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 Please return evidence to the following:

Attn: Morgan Kennedy

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	nange is submitted for a corpo	notes of the State of Statutes, this ration organized under the laws of the State of Nevada ice or registered agent, or both, in the State of Florida.	_
1. The name of	the corporation: MAIL BOX S	STORES, INC	
2. The principa	1 60 11		
3. The mailing	address (if different):		
4. Date of inco	rporation/qualification: 04/04	/2006 Document number: F06000002178	
	nd street address of the current artment of State: (If resigned,	registered agent and registered office on file with the enter resigned)	
	Incorp Services, Inc.		
	17888 67th Court North		<u> </u>
	Loxahatchee, FL 33470		
6. The name an (if changed):		gistered agent (if changed) and /or registered office	SECRETARY POSALION
	Corporation Service Compa	any	PORALICATION
	1201 Hays Street		ار م
	P.O. Box NOT acceptable		
	Tallahassee	FL 32301	
The street addr as changed wil	ress of its registered office an l be identical.	d the street address of the business office of its registered age	ent,
Such change wanthorized by t	vas authorized by resolution d the board, or the corporation	uly adopted by its board of directors or by an officer so has been notified in writing of the change.	
Signal	ure of an officer or director	Dona Priebe, Vice President Printed or typed name and title	_
I further agree performance o agent. Or, if th hereby confirm	the appointment as register, to comply with the provision f my duties, and I am familian his document is being filed m	ed agent and agree to act in this capacity. is of all statutes relative to the proper and complete r with and accept the obligation of my position as registered erely to reflect a change in the registered office address, I en notified in writing of this change.	
Ву:	co Cokubi.	December 18, 2013	
	gnature of Registered Agent	Date	
	ehalf of an entity:		
	r, Asst. Vice President Typed 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 * * *