F11000000 4277

(Re	questor's Name)			
(Ad	dress)	-		
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(Cit	ty/State/Zip/Phone #)			
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PICK-UP	WAIT	MAIL		
(Bu	siness Entity Name)			
(Do	ocument Number)			
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Special Instructions to	Filing Officer:			
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Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Anthony Arthur anthony.arthur@cscglobal.com

Date: November 22, 2019

Order#: 059308-039

Re: DAN BROWN AND ASSOCIATES, P.C.

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: Anthony Arthur

c/o Corporation Service Company

251 Little Falls Drive 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 cha	nge is submitted for a corp	.0502, 617.0502, 607.1508, o poration organized under the office or registered agent, or	laws of the State of	TN		
		WN AND ASSOCIATES, PC	_			
2. The principal	office address: 300 WOOI	DLAND ROAD, SEQUATCH	IE, TN 37374			
3. The mailing a	address (if different): P.O.	BOX 309, JASPER, TN 373	47			
4. Date of incorp	rporation/qualification: 10/24/2011 Document number: F11000004277					
	d street address of the curre rtment of State: (If resigned	ent registered agent and regist				
	Meyer, Barry J			_		
	10314 Greenhedges Driv	⁄e		_		
	Tampa	F	L 33626	_		
6. The name and (if changed):	d street address of the new	registered agent (if changed)	and /or registered o	ffice	主点	
	Corporation Service Con	npany		19 HOY 2		
	1201 Hays Street			26	37	
	Tallahassee	P.O. Box NOT acceptable	L 32301	्रि (० -	1017/86/44C	
The street address changed will	ess of its registered office be identical.	and the street address of the	business office of i	ts registered ager	nt. 55	
Such change wa authorized by the	as authorized by resolution he board, or the corporation	n duly adopted by its board c on has been notified in writin	of directors or by an g of the change.	officer so		
Sin E	Cani	Jill Cilmi, Vio			_	
I hereby accept I further agree performance of agent. Or, if th hereby confirm	to comply with the provisi my duties, and I am famil is document is being filed	tered agent and agree to act ions of all statutes relative to liar with and accept the obli- merely to reflect a change i been notified in writing of th) the proper and con gation of my position in the registered offi	mplete m as registered		
By: Drace	. Y-Kubl.	11/22/2019			=	
- 2	nature of Registered Agent		Date			
	, Assistant Vice President					
	yped or Printed Name					

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