F1300000 4282

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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03/15/19--01024--016 **35.00



RA/RO/Ch8

MAR 2 6 2019 I ALBRITTON



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: March 13, 2019

Order#: 683064-015

Re: PRATERS INCORPORATED

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: Ami Casper 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.

OUCA.XCOA

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

statement of cha	unge is submitted for a co	7.0502, 617.0502, 607.150 rporation organized under Loffice or registered agent,	the laws of the State of	f Tennessee	
1. The name of	the corporation: PRATE	RS INCORPORATED			
2. The principal	office address: 2712 8th	Avenue, Chattanooga, Ti	N 37407		
3. The mailing a	address (if different):				
4. Date of incorp	poration/qualification: 0	9/25/2013 Doc	ument number: F1300	00004282	
	d street address of the cur rtment of State: (If resign	rent registered agent and re ed, enter resigned)	egistered office on file	with the	
	C T Corporation System	n		_	
	1200 South Pine Island Road				
	Plantation, FL 33324				
6. The name and (if changed):	d street address of the nev	w registered agent (if chang	ged) and /or registered	10191111 5 FH 12: 03	
	Corporation Service Co	ompany		7: Oí	
	1201 Hays Street				
		P.O. Box NOT acceptable			
	Tallahassee		FL 32301	·	
The street address changed will	ess of its registered offic be identical.	e and the street address of	the business office of	its registered agent,	
Such change was authorized by the		on duly adopted by its boation has been notified in w	_	n officer so	
Outra Signing	are of an officer or director	Debra	Trater Printed or typed name and	Secretary/	
I further agree performance of agent. Or, if th hereby confirm	to comply with the provi my duties, and I am fam is document is being file	stered agent and agree to sions of all statutes relativ iliar with and accept the o d merely to reflect a chan been notified in writing o	ve to the proper and co obligation of my positi ge in the registered of	ion as registered	
	mature of Registered Agent		Date		
If signing on be	ehalf of an entity:				
	, Asst. Vice President				
Υ	smed or Printed Name				

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