## F1600000 4700

(R	equestor's Name)				
(Ad	ddress)				
(A	ddress)				
(C	ity/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bi	usiness Entity Nar	ne)			
(3	comess Emily Har				
(Document Number)					
Certified Copies	Certificates	s of Status			
Special Instructions to	Filing Officer:	-:-			





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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: Meghan Groom meghan.groom@cscglobal.com

Date: October 9, 2019

Order#: 935769-013

Re: WARTSILA DEVELOPMENT & FINANCIAL SERVICES, 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: Meghan Groom

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	orovisions of sections 607.0502, 617, nge is submitted for a corporation or r to change its registered office or re	ganized under the la	ws of the State of	Delaware	
	he corporation: WARTSILA DEVELO				
•	office address:ssner Rd Suite A Houston, TX 77064	4			
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 10/19/2016	Document	number: F16000	004700	
	I street address of the current register tment of State: (If resigned, enter res		ed office on file v	vith the	
	C T CORPORATION SYSTEM			_	
	1200 SOUTH PINE ISLAND ROAD			- 3	30
	PLANTATION	FL	33324	1/VT-7-1-1-1	) 
6. The name and (if changed):	I street address of the new registered	agent (if changed) ar	nd /or registered o	office = =	
	Corporation Service Company			_ :	
	1201 Hays Street			28	
		NOT acceptable	22204		
	Tallahassee	FL.	32301		
The street addre	ess of its registered office and the stube identical.	reet address of the bu	isiness office of	its registered a	gent,
Such change wa authorized by t	as authorized by resolution duly ado na board, or the corporation has been	pted by its board of a notified in writing	directors or by ar of the change.	officer so	
	Xie & a ani	Jill Cilmi, Vice			
Signati	ne of an officer or director	Prini	ed or typed name and t	itle	
I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agen to comply with the provisions of all my duties, and I am familiar with a is document is being filed merely to that the corporation has been notifi on Service.Company	statutes relative to ti nd accept the obliga reflect a change in t	ne proper and co tion of my positic he revisiered off	m as registere	d
		10/08/2019			
Sig	mature of Registered Agent		Date		
If signing on be	chalf of an entity:				
	Asst. Vice President				
	yped 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 \* \* \*