F99000003219

(Req	uestor's Name)	
· (Add	lress)	
(Add	lress)	
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iiness Entity Nan	ne)
(Doc	cument Number)	,
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	
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Office Use Only



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MAR 20 2017 I ALBRITTON



CSC - WILMINGTON
Suite 400
2711 Centerville Road
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, 2017

Order#: 532184-035

Re: CC OUTLET, 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: Ami Casper

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 cha	ange is submitted for a corporation o	.0502, 607.1508, or 617.1508, Florida Statutes, this rganized under the laws of the State of DE rgistered agent, or both, in the State of Florida.
1. The name of t	the corporation: CC OUTLET, INC.	
2. The principal 2381 EXECU	office address: UTIVE CENTER DRIVE BOCA RAT	ON FL 33431
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification: 06/22/1999	Document number: F99000003219
	I street address of the current register tment of State: (If resigned, enter res	ed agent and registered office on file with the igned)
	C T CORPORATION SYSTEM	5 g 3
	1200 SOUTH PINE ISLAND ROAD	
	PLANTATION	FL 33324
6. The name and (if changed):	Street address of the new registered Corporation Service Company	agent (if changed) and /or registered office
	1201 Hays Street	
		NOT acceptable
	Tallahassee	FL 32301
The street addre as changed will	ess of its registered office and the str be identical.	reet address of the business office of its registered agent,
Such change wa authorized by th	is authorized by resolution duly ado the board, or the corporation has been	pted by its board of directors or by an officer so inotified in writing of the change.
Xie &	9 aonie	Jill Cilmi, Vice President
Thereby accept I further agree to performance of agent. Or, if this hereby confirm	my duties, and I am familiar with a	statutes relative to the proper and complete nd accept the obligation of my position as registered reflect a change in the registered office address, I
By: Uno	nature of Registered Agent	03/06/2017 Date
If signing on bel	half of an entity:	
Grace E. Kirby,	Asst. Vice President	
Tv	ped 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 * * *