I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LOUIS D'AGOSTINO

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# M40197

Entity Name: LOUIS D'AGOSTINO, INC.

Current Principal Place of Business:

630 MULBERRY STREET ZIONSVILLE. IN 46077

Current Mailing Address:

630 MULBERRY STREET ZIONSVILLE. IN 46077 US

FEI Number: 59-2715586

Name and Address of Current Registered Agent:

KHRON, SHARON 5920 SW 18TH STREET PLANTATION, FL 33317 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Officer/Director Detail : DPV Title Title ST D'AGOSTINO LOUIS ... Name

Name	D'AGOSTINO, LOUIS	Name	D'AGOSTINO, LOUIS
Address	630 MULBERRY STREET	Address	630 MULBERRY STREET
City-State-Zip:	ZIONSVILLE IN 46077	City-State-Zip:	ZIONSVILLE IN 46077

Date Electronic Signature of Registered Agent

FILED Feb 20, 2019 Secretary of State 7703264698CC

Certificate of Status Desired: No

02/20/2019 Date

PRESIDENT