FILED EFFECTIVE

08 MAY - 1 AM 8" - 1 ON STATE Number: CO 1565 TLO SECRETARY OF ID AHOF ILE Number: CO 1565 TLO

## STATEMENT OF CHANGE OF BUSINESS MAILING ADDRESS (see reverse for instructions)

The entity identified below submits to the Secretary of State the following statement for the purpose of changing its business mailing address. 1. The name of the business entity is: COAST PROFESSIONAL INC. 2. The business mailing address is currently on file as: 14742 NEWPORT AVE, STE 108 TUSTIN CA 92780 3. The business mailing address is to be changed to: 888 S. DISHEYLAND DRIVE, STE 100, ANAHEIMCA92802 4. Change of address is effective: Upon Receipt OR 31508 Signed: 📩 Printed Name: BRIAN DAVIS Capacity: \_ Dated:

encombination and a service of the s

FILE ONE COPY

NO FEE REQUIRED