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(Requestor's Name)						
(Requestors Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
, , ,						
(Document Number)						
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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: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: August 11, 2020

Order#: 381135-013

Re: IPEX USA LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

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: Erika Zavala Daza

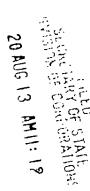
c/o Corporation Service Company

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.

QUCA.XCOA



STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

l.	Na	ame of the limited liability company: IPEX USA LLC				_
2	(a)	10100 RODNEY ST	(b)	3 PLAC	CE DU COMMERCE	
	(4)	Principal office address of limited liability company:	_		Mailing address of limited liability company:	_
		(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST OFFICE BOX)	
				SUITE 10	01	
			_			_
		PINEVILLE, NC 28134	_	<u>VERDUN</u>	N H3E 1H7 CA	_
		01/21/2003		M030000	000248	
3.		Date of filing/registration in Florida	4.		Document number	_
۔	(2)	C T CORPORATION SYSTEM				
5.	(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State			_ te:	
		1200 SOUTH PINE ISLAND ROAD Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
		Registered Office Address	DONESS			
					- 2 IVI	
		PLANTATION , FL	33324		9	
					20 AUG	_
	(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered Office address:			_	=
	• •				- 000 - 000 - 000	
					AMII: 12	;
		1201 Hays Street			_ 二 当	≯ 4 *
		NEW Registered Office Address:			~ ○ ∴	
				-	_	
		Tallahassee, FL_	32301		_	
			۴.1	c		
it th	the I e cha	imited liability company is not organized under the law ange or changes are made, the Florida street address of	/s of the the regis	State of Fig tered office	e and the business office of the register	ed
ag	gent v	will be identical. Or, in the case of a Florida limited lia	bility co	mpany, it i	is hereby confirmed that the change(s)	
		ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the				
		/s/Nicole Chouinard			ard, Secretary/ Authorized Person	
_	Signa	ture of a member or authorized representative of a member	14100	C Oriodina	Printed or typed name of signee	
I	here	by accept the appointment as registered agent and agre	ee to act	in this cap	pacity. I further agree to comply with t	ie.
pr	ovisi	ons of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address. I h	performa d for in C	nce of my hanter 60'	duties, and I am familiar with and acci 5 F.S. Or if this document is being fil	pt d
10	mer	ely reflect a change in the registered office address. I h	iereby co	nfirm that	the limited liability company has been	
ne	nijie	d in writing of this change. Linace C. Kinble				
s	ignatu	re of Registered Agent Corporation Service Company	BY: Gr	ace E. Ki	irby, Asst. Vice President	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00