## 818588

(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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WEI JUL 28 AHII: L

#11:46 FLORIL CORPORATION SERVICE COMPANY 1201 Hays Street

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	: 120000001	95				
	REFERENCE	: 925895	4722300				
	AUTHORIZATION	Spulloler	ran				
	COST LIMIT	: \$35.00					
Oppose Dime	.1 02 0001						
ORDER DATE : Ju	.1y 23, 2021						
ORDER TIME : 9	:44 AM						
ORDER NO. : 92	5895-010						
CUSTOMER NO:	4722300						
			<b>-</b>				
CHANGE OF AGENT							
NAME :	AMERICAN HONDA	A MOTOR CO., II	vC .				
PLEASE RETURN TH		PROOF OF FILI	<b>VG</b> :				
XX PLAIN ST							
CONTACT PERSON:	Alexxis Weilar	nd					

EXAMINER'S INITIALS:

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0 ange is submitted for a corporation org er to change its registered office or reg	ganized under the law	vs of the State of	California			
1. The name of	the corporation: _AMERICAN HOND.	A MOTOR CO INC					
2. The principal office address: 1919 Torrance Boulevard, Torrance, CA 90501							
	/		,				
4. Date of incor	Date of incorporation/qualification: 03/19/1965 Document number: 818588						
	d street address of the current registere rtment of State: (If resigned, enter resi		d office on file v	vith the			
	C T Corporation System			<b></b> -			
	1200 South Pine Island Road			_			
	Plantation	FL	33324				
6. The name and (if changed):	d street address of the new registered a Corporation Service Company	agent (if changed) and	d /or registered o	ffice ಲ			
	1201 Hays Street						
	P.O. Box NOT acceptable						
	Tallahassee	FL	32301	- FH 5			
The street address changed will	ess of its registered office and the stre be identical.	eet address of the bu	siness office of	its registered agent,			
Such change wanthorized by the	as authorized by resolution duly ador he board, or the corporation has been	oted by its board of d notified in writing o	lirectors or by an of the change.	n officer so			
$X_{i}$	ee & Gonie	Jill Cilmi, Vlce	President				
Mgnuhu	re of an officer or director	Pnnte	ed or typed name and	title			
I further agree of my duties, ar document is bet corporation has	the appointment as registered agent to comply with the provisions of all s ad I am familiar with and accept the d ing filed merely to reflect a change in s been notified in writing of this chan n Service Company!	tatutes relative to the obligation of my posi i the registered office	e proper and co	mplete performance ed agent. Or, if this by confirm that the			
By:	in Lev	07/28/2021					
	mature of Registered Agent		Date				
If signing on be	chalf of an entity:						
Ami M. Casper,	Asst. Vice President						
T	yped or Printed Name						

\* \* \* FILING FEE: \$35.00 \* \* \*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)