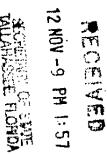
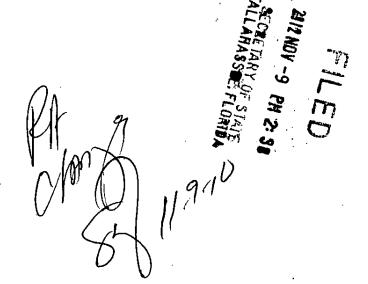


(Re	equestor's Name)	 		
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
t.	.			
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				











CORPORATION SERVICE COMPANY ACCOUNT NO. : I2000000195

REFERENCE: 414037

AUTHORIZATION :

COST LIMIT : \$ 35.00/

ORDER DATE: November 9, 2012

ORDER TIME : 10:09 AM

ORDER NO. : 414037-069

CUSTOMER NO: 7902973

CHANGE OF AGENT

NAME:

VOLKSWAGEN GROUP OF AMERICA,

INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY

CONTACT PERSON: Carina L. Dunlap

EXAMINER'S INITIALS:

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

.~.

statement of cha	nnge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida organized under the laws of the State of registered agent, or both, in the State of .	NJ	
1 The name of	the comparation. VOLKSWAGEN	N GROUP OF AMERICA, INC.		
		Suite 3701, Boston, MA 02116		
3. The mailing a	address (if different):			
4. Date of incorp	poration/qualification: 6/07/1972	Document number: 830223	3	
	street address of the current regist tment of State: (If resigned, enter r	ered agent and registered office on file westigned)	vith the	
	CT Corporation System			
	1200 South Pine Island Roa	ad ·	7 2	
	Plantation FL 33324		ECRET	77
6. The name and (if changed):	I street address of the new registere	ed agent (if changed) and /or registered of	1-9 PM	
	Corporation Service Compa	any	FLOS	
	1201 Hays Street			
	Tallahassee, FL 32301	ox NOT acceptable		
The street address changed will	ess of its registered office and the be identical.	street address of the business office of it	ts registered agent,	,
	as authorized by resolution duly ac ne board, or the corporation has be new Cathelf	dopted by its board of directors or by an en notified in writing of the change. Maureen Cathell, Vice Pres		
Signatu	re of an officer or director	Printed or typed name and tit		
I further agree performance of agent. Or, if th hereby confirm	to comply with the provisions of a my duties, and I am familiar with	ent and agree to act in this capacity. Il statutes relative to the proper and con and accept the obligation of my position to reflect a change in the registered offic ified in writing of this change.	n as registered	
By: Don't	بالذلحار	11/6/2012		
Sig	nature of Registered Agent	Date		
If signing on be	half of an entity:			
Grace E. Kir	by, AVP			
T	yped or Printed Name			

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