

8345a4

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

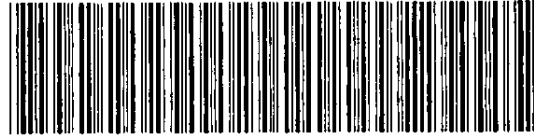
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DEPARTMENT OF STATE  
16 AUG 29 PM 2:06

2016 AUG 29 A 9:42

2016 AUG 29

AUG 30 2016  
T. [Signature]

Date: 08/29/2016

Account #: I20000000088

Name: Michelle Walker

Reference #: C016796

ENTITY NAME: K+S NORTH AMERICA CORPORATION

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Annual Report

☒ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other: \_\_\_\_\_

Authorized Amount: \$35

Signature: Michelle Walker

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of New York in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: **K+S NORTH AMERICA CORPORATION**
2. The principal office address: **123 N. Wacker Dr. CHICAGO IL 60606**
3. The mailing address (if different): **123 N. Wacker Dr. CHICAGO IL 60606**
4. Date of incorporation/qualification: **June 16, 1975** Document number: **834524**
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

**CORPORATION SERVICE COMPANY**

**1201 HAYS STREET**

**TALLAHASSEE, FL 32301-2525**

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

**National Corporate Research, Ltd., Inc.**

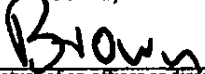
**115 North Calhoun St., Suite 4**

P.O. Box NOT acceptable

**Tallahassee, FL 32301**

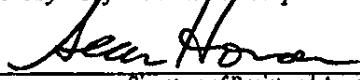
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

**Dr. Martin Brown, President**  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
Signature of Registered Agent

**8/29/2016**  
Date

If signing on behalf of an entity:

**Sean Honan, Assistant Secretary**

Typed 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

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