B69000 000 149

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



700335290027

200 - 19 | 117 1 HEVE | ₩85,10

008. 15 ft 2:5

RARDICHS

NOV 0 7 2019 I ALBRITTON



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: October 14, 2019

Order#: 930283-011

Re: H & M HENNES & MAURITZ L.P.

Enclosed please find:

XX ___ Change of Registered Agent and Office.

XX Check in the amount of \$35 .

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: Ami Casper 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

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

l	H & M HENNES	& MAURI	TZ, LP	
N:	ame of Limited Partnership or Lir	nited Liability L	imited Partners	hip
210/20/2009		3	B0900000149	
Date of filing/registration in Florida			Florida document number	
4. The name of the re Department of State:	egistered agent and the registered	office address a	s shown on the	records of the Florida
	C T Corporat	ion System		
	Nar			
1200 South Pine Island Road				
	Plantation	FL	33324	191
	City, State	and Zip		Ç-
5. The name and Flo	rida street address of the new reg	istered agent and	l/or office:	
	Corporation Ser	vice Compai	ny	
	Nar	ne		?
1201 Hays Street				ِئر بن
Florida street address (P.O. Box not acceptable)				U
	Tallahassee	F1.	32301	
	City, State	and Zip		
6. Such change(s) is/	are effective when filed by the Fl	orida Departmer	nt of State.	
Xie 2	Comi	•		
Signature of General	Partner Jill Cilmi, Authorized	Person on bel	half of H & M I	Hennes & Mauritz
I hereby accept the at	Management B.V. Ll opointment as registered agent ar			
comply with the provi	isions of all statutes relative to the	e proper and coi	mplete performe	ance of my duties.
and I am familiar wit.	h an accept the obligations of my on Service Cempany	position as regi	stered agent.	
By:	M Service Continually			
Signature of Register	ed Agent			
Ami M. Casper, As	st. Vice President			
Filing Fee:	\$35.00			
Certified Copy (c	optional): \$52.50			