Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6380

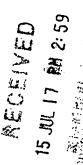
From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)205-8842 Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:



REGISTERED AGENT CHANGE MOLEX INCORPORATED

Certificate of Status	0
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Estimated Charge	\$35.00

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JUL 20 2015

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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Molex Incorporated Name of Corporation			
DOCUMENT NUMBER: F03000001752			
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Nicole Soneson Name of Contact Person			
Name of Contact Person			
Molex Incorporated			
Firm/Company			
2222 Wellington Court			
Lisle, IL 60532			
City/State and Zip Code			
Nicole. Soneson @ Molex.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Nicole Soneson at (630) 527-2605 Name of Contact Person Area Code & Daytime Telephone Number			
Name of Contact Person Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.			

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E045 (03/12)

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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of DE registered agent, or both, in the State of Florida.
1. The name of t	he corporation: MOLEX INCORPO	PRATED
2. The principal	office address: 2222 WELLINGTO	N COURT, LISLE, IL 60532
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification: 04/08/2003	Document number: F03000001752
	I street address of the current regis timent of State: (If resigned, enter	tered agent and registered office on file with the resigned)
	NRAI SERVICES, INC.	
	1200 South Pine Island Road	
	Plantation, FL 33324	
6. The name and (if changed):	I street address of the new register	ed agent (if changed) and /or registered office
	C T Corporation System	
	1200 5	South Pine Island Road
	P.O. E Plantation, Florida 33324	Box NOT acceptable
The street address changed will	rss of its registered office and the be identical.	street address of the business office of its registered agent,
Such change was	as authorized by resolution duly a ne board, or the corporation has b	dopted by its board of directors or by an officer so een notified in writing of the change.
Clabe	of f, Zirtling or director	Robert J. Zeitter Secretary
agent. Or. 13 in	the appointment as registered ag to comply with the provisions of a my duties, and I am familiar with is document is being filed merely that the corporation has been no	ent and agree to act in this capacity. Ill statutes relative to the proper and complete I and accept the obligation of my position as registered to reflect a change in the registered office address, I tified in writing of this change.
By: A T Cor	purption System	7/17/2015
) ig	nature of Registered Agent	Date
If signing on be	half of an entity:	
Katherine Lacke		
r	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 (03/12)