## F0300001885

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	



200252710892

10/11/13--01025--003 \*\*35.00

Office Use Only

RARO Ch8



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Evelyn Wright

Date: October 9, 2013

Order#: 837903-002

Re: PINDAR NORTH AMERICA INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

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: Evelyn Wright

c/o Corporation Service Company
2711 Centerville Road, Suite 400

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

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

statement of cha	ange is submitted for a corporat	2, 617.0502, 607.1508, or 617.1508, Florida Statutes, this tion organized under the laws of the State of Delaware or registered agent, or both, in the State of Florida.	_
1. The name of	the corporation: PINDAR NO	ORTH AMERICA INC.	<b></b>
• •	l office address: Orleans Suite 602, Chica	go, IL 60654	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 04/15/	2003 Document number: F03000001885	
	d street address of the current re rtment of State: (If resigned, ent	egistered agent and registered office on file with the ter resigned)	
	C T Corporation System		
	1200 South Pine Island I	Rd.	
	Plantation, FL 33324		
6. The name an (if changed):	d street address of the new regis	stered agent (if changed) and /or registered office	
	Corporation Service Con	npany	
	1201 Hays Street	,	, re
	Tallahassee, FL 32301	O. Box NOT acceptable	35
The street addr as changed will	ess of its registered office and to learn the second to the second to the second terms of the second terms	the street address of the business office of its registered age	ent,
Such change w authorized by t	as authorized by resolution dul he board, or the corporation ha	y adopted by its board of directors or by an officer so s been notified in writing of the change.	
	ore of an officer or director	Dona Priebe, Vice President	_
I hereby accept I further agree performance of agent. Or, if th hereby confirm	t the appointment as registered to comply with the provisions of my duties, and I am familiar w iis document is being filed mer	agent and agree to act in this capacity. of all statutes relative to the proper and complete with and accept the obligation of my position as registered ely to reflect a change in the registered office address, I notified in writing of this change.	
By: Elizabe	gnature of egistered Agent	10/07/2013	_
	ehalf of an entity:	Duic	
Elizabeth A.	Dawson, Asst. Vice Presi	dent	
T	voed or Printed Name	<del></del>	

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

THECKS PAYARI E TO FLORIDA DEPARTMENT OF STATE