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

: (850)878-5368

Fax Number

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

Email Address:

REGISTERED AGENT CHANGE RED WING BRANDS OF AMERICA, INC.

Certificate of Status	0
Certified Copy	0
Page Count	Of 0.3
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

SUBJECT: RED WING BRANDS OF AMERICA, INC. Name of Corporation F030000006062 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: Name of Contact Person Firm/Company Address City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Contact Person at (Area Code & Daytime Telephone Number inclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Amendment Section Street Address: Amendment Section	Division o	nt Section f Corporations				
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		Mailing Address:	Street Address:			
		Amendment Section Division of Corporations				
Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building						
Tallahassee, FL 32314 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 ch	ange is submitted for a corpor	02, 617.0502, 607.1508, or 617.1508, catton organized under the laws of the	State of Minnesota
		ice or registered agent, or both, in the	State of Florida.
1. The name of	the corporation: KED WING E	BRANDS OF AMERICA, INC.	
2. The principa	office address: 314 MAIN ST	REBT, RED WING, MN 55066	
3. The mailing	address (if different):		
4. Date of incor	poration/qualification: 12/08/	2003 Document number:	F03000006062
	d street address of the current riment of State: (If resigned, e	registered agent and registered office oner resigned)	on file with the
	CORPORATION SERVICE C	COMPANY	
	1201 HAYS STREET, TALL	AHASSEE, FL 32301	
6. The name and (if changed):	d street address of the new reg	dstered agent (if changed) and/or regi	istered office
	c/o C T Corporation System, I	200 South Pine Island Road	<u> </u>
	Plantation, Florida 33324	P.O. Box NOT acceptable	
		the street address of the business of	
Such change wi authorized by to	as authofited by resolution do ne hoard or the corporation h	aly adopted by its board of directors as been notified in writing of the cha	or by an officer so inge.
	11/1/	Jennifor Kurz, Sceretary	
I hereby accept I further agree performance of agent. Or, if the hereby confirm		d agent and agree to act in this capa t of all statutes relative to the proper with and accept the obligation of my rely to reflect a change in the registe n notified in writing of this change.	
By: C.T.Cor	poration System	5/14/2015	
<i>y</i> -	nature of Regulatored Agent	d Vounan	
it signing on be	half of an entity: Alfred Assistan	it Secretary.	
_ 	yped or Printed Name		
	***F	ILING FEB: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

FL004 - 05/20/2013 Walters X-bower Collins

CR2E045 (03/12)