2007 FOR PROFIT CORPORATION REINSTATEMENT

CITY-ST-ZIP

SIGNATURE:

indicated on this report or supplementally of the corporation or the receiver or trust

changed, or on an attachment with an

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS DOCUMENT # F06000006326 1. Entity Name RICHELIEU AMERICA LTD., INC. 97 OCT 23 AM 9: 58 Principal Place of Business Mailing Address 7900 HENRI-BOURASSA W. BLVD 7900 HENRI-BOURASSA W. BLVD ST. LAURENT ST. LAURENT QUEBEC H4S 1V4 CANADA, 00 QUEBEC H4S 1V4 CANADA, 00 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 10192007 REIN-P CR2E098 (1/07) City & State City & State 4. FEI Number Applied For 98-0195209 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. After January 1, 2008, Fee will be \$300.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10 11. Delete Addition TITLE TIBLE Change LORD, RICHARD HELENE LEVES QUE NAME NAME STREET ADDRESS 7900 HENRI-BOURASSA W. BLVD STREET ADDRESS 7900 HEURI-BOUSASSA W. CITY-ST-ZIP QUEBEC H4S 1V4 CANADA, CITY-ST-ZIP VILLE ST-LAUGELY, CANADA, OC TITLE VCT **Delete** TITLE ☐ Change ■ Addition ALBERT, GEORGES 700111197357 10/23/07--01025--007 **15 NAME NAME STREET ADDRESS 7900 HENRI-BOURASSA W. BLVD STREET ADDRESS **150.00 CITY-ST-ZIP QUEBEC H4S 1V4 CANADA, CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE GIASSON, ALAIN NAME 7900 HENRI-BOURASSA W. BLVD STREET ADDRESS STREET ADDRESS QUEBEC H4S 1V4 CANADA, CITY-ST-ZIP CITY-ST-ZIF HILE Delete THLE ☐ Addition JODOIN, CHRISTIANE NAME NAME STREET ADDRESS 7900 HENRI-BOURASSA W. BLVD STREET ADDRESS CITY-ST-7IP QUEBEC H4S 1V4 CANADA, CITY-ST-ZIP TITLE Defete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information

N GIRSSON

report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director en empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if