## F07000006332

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18 AUG -1 FIT 2: OF AUGUSTION TALL STATES OF THE ORIGINAL STATES OF

RARCICIOS

AUG 02 2018 I ALBRITTON CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 324465 7165233

AUTHORIZATION

COST LIMIT : (\$\frac{35.00}{35.00}

ORDER DATE : July 30, 2018

ORDER TIME : 1:52 PM

ORDER NO. : 324465-010

CUSTOMER NO: 7165233

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CHANGE OF AGENT

NAME: DOKA USA LTD. INC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Emily Croft

EXAMINER'S INITIALS:

## **COVER LETTER**

TO:	Amendment Section Division of Corporations					
SUBJ	Doka USA Ltd. Inc ECT:					
	Name of Corporation					
DOC	F07000006332 UMENT NUMBER:					
	closed 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 fu	rther information concerning this matter, please call:					
	Name of Contact Person at ( )  Area Code & Daytime Telephone Number					
Enclo	sed is a \$35.00 check made payable to the Department of State.					
	Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle					

Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.05: inge is submitted for a corpor r to change its registered offic	ration organized under	the laws of the State o	New Jersey	
<del></del>	the corporation: Doka USA Lt		, ,	, • - • - • • • • • • • • • • • • • • •	
	office address: 214 Gates Ro		7643		
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: New J	ersey Doc	ument number: F0700	0006332	- · · · - ·
	I street address of the current tment of State: (If resigned, e		egistered office on file	with the	
	Andrew Mair				
	4060 Selvitz Road			2018 AUG SECRE 1: TALL AHA	
	Fort Pierce, FL 34981			ANASA ANASA * BUN	=
6. The name and (if changed):	ged) and /or registered (	E	ED		
	Corporation Service Compa	ıny		9: 01 STATE LOAD	
	1201 Hays Street			<u> </u>	
		P.O. Box NOT acceptable		_	
	Tallahassee		FL 32301	<del>-</del>	
as changed will					· ·
Such change wa authorized by th	as authorized by resolution d ne board or the corporation l	uly adopted by its boa nas been notified in w	ard of directors or by a riting of the change.	n officer so	
		Markus \			
- / //	ge of an officer or director		Printed or typed name and	title	
I further agree performance of agent. Or, if the hereby confirm Corporation	the appointment as registere to comply with the provision.  my duties, and I am familiar is document is being filed me that the corporation has been Service Company	s of all statutes retain rwith and accept the c erely to reflect a chan	ve to the proper and co obligation of my positi we in the registered of		
_	insure of Residered Agent Chalf of an entity:	# 2010	Date		
Emily	Croft				
ASSL VICE	Prosidentiame				

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

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