## F08000000312

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



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09/04/20--01025--002 \*\*35.00

2020 SEP -4 AH 10: 12

Ja 6/15/20



CSC - WILMINGTON

251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: September 2, 2020

Order#: 400911-010

Re: COLOPLAST CORP.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

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: Erika Zavala Daza

c/o Corporation Service Company

251 Little Falls Drive 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	nge is submitted for a corpo	1502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this pration organized under the laws of the State of DE florida.	
1. The name of	the corporation: COLOPLAS	ST CORP.	
2. The principal	office address: 1601 West F	River Road, Minneapolis, MN 55411	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 01/23	3/2008 Document number: F08000000312	
	d street address of the curren rtment of State: (If resigned,	nt registered agent and registered office on file with the enter resigned)	
	C T CORPORATION SYS	STEM	
	1200 SOUTH PINE ISLAND ROAD		
	PLANTATION, FL 33324		
6. The name and (if changed):	d street address of the new re	egistered agent (if changed) and /or registered office	
	Corporation Service Com	pany	
	1201 Hays Street		
	<u> </u>	P O Box NOT acceptable	
	Tallahassee	FL 32301	
The street address changed will	ess of its registered office as be identical.	nd the street address of the business office of its registered agent.	
Such change was authorized by the	as authorized by resolution ne board, or the corporation	duly adopted by its board of directors or by an officer so has been notified in writing of the change.	
$\chi$	e & almi	Jill Cilmi, Vice President	
I hereby accept I further agree of my duties, an document is bei corporation has	to comply with the provision ad I am familiar with and ac ing filed merely to reflect a s been notified in writing of	Printed or typed name and title  red agent and agree to act in this capacity,  ins of all statutes relative to the proper and complete performance  ccept the obligation of my position as registered agent. Or, if this  change in the registered office address, I hereby confirm that the  this change.	
	n Service Company ⊂	09/02/2020	
By: Mace Sig	T-Kubl mature of Registered Agent	Date	
If signing on be	half of an entity:		
Grace E. Kirby,	Asst. Vice President		
T	yped or Printed Name		

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