5/18/2020

Division of Corporations

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.

(((H200001468183)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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

Email Address:_

REGISTERED AGENT CHANGE NEWYU, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

Electronic Filing Menu Corporate Filing Menu

Help

MAY 1 9 2020

To: Page 3 of 3

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

statement of cha	nge is submitted for a corporation	517.0502, 607.1508, or 617.1508, Florida n organized under the laws of the State of r registered agent, or both, in the State of	Delaware
	the corporation: Newyu, Inc.	k Road, Abbott Park, IL 60064	
		tt Park Road, Dept. 0367, Bld. AP6D,	Abbott Park, IL 6006
4. Date of incorp	poration/qualification: 01/17/2012	Document number: F1200	00000224
	d street address of the current regis rtment of State: (If resigned, enter	stered agent and registered office on file resigned)	with the
	Corporation Service Company		_
	1201 Hays Street	· ·· ·	
	Tallahassee, FL 32301		2020 HAY IN
6. The name and (if changed):	I street address of the new register	red agent (if changed) and /or registered o	office So To
	C T Corporation System		
	c/o C T Corporation System, 1200		8: 5 <u>1</u>
	Plantation, Florida 33324	Box NOT acceptable	
The street addre	ess of its registered office and the be identical.	street address of the business office of	its registered agent,
Such change was authorized by th	as authorized by resolution duly a board, or the corporation has b	adopted by its board of directors or by a seen notified in writing of the change.	n offic er so
	ure of an officer or director	Jessica H. Paik, Secretary Printed or typed name and to	it ic
I hereby accept I further agree to performance of agent. Or, if the	the appointment as registered ag to comply with the provisions of c my duties, and I am familiar with	gent and agree to act in this capacity. all statutes relative to the proper and co h and accept the obligation of my positic to reflect a change in the registered off	mplete on as registered
Ву: (poration System Jan M. Hu	05/14/2020	
7	Anture of Registered Agent chalf of an entity:	Date	
james Halpin, As			
	yped or Printed Name	-	

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)