F1200000 4673

(Reque	estor's Name)			
(Addre	ss)			
(Addre	ss)			
(City/S	tate/Zip/Phone #)		
PICK-UP	WAIT	MAIL		
(Busine	ess Entity Name)			
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer:				

Office Use Only



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11/13/13--01017--002 **35.00

TALL BOY 13 PH 4: 12

WOV 1 8 2013 T. CARTER



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper acasper5@cscinfo.com

Date: November 11, 2013

Order#: 875140-030

Re: CSM BAKERY PRODUCTS NA, INC.

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: Ami Casper

c/o Corporation Service Company 2711 Centerville Road, Suite 400

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	ange is submitted for a corporation	517.0502, 607.1508, or 617.1508, Florida Statutes or organized under the laws of the State of <mark>Delawa</mark> or registered agent, or both, in the State of Florida.	re	_
	the corporation: CSM BAKERY PI			
2. The principal	office address: 1912 Montreal Ro	ad, Tucker, GA 30084	.	
3. The mailing a	address (if different):			
4. Date of incor	oration/qualification: 11/07/2012 Document number: F12000004673			
	d street address of the current regis	stered agent and registered office on file with the resigned)		
	Registered Agent Solutions, Inc			
	155 Office Plaza Drive, Suite A			IV.I
	Tallahassee	FL 32301	3 NOV 13	1380
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	Corporation Service Company		<u></u>	SIS:
	1201 Hays Street		2	IDA IE
		Box NOT acceptable		
	Tallahassee	FL 32301		
The street addr as changed will	ess of its registered office and the be identical.	street address of the business office of its registe	ered ag	ent,
Such change wanthorized by t	as authorized by resolution duly a he board, or the corporation has b	dopted by its board of directors or by an officer een notified in writing of the change.	so	
' /_	\mathcal{A}	Dona Priebe, Vice President		
Signati	ire of the officer or director	Printed or typed name and title		_
I further agree performance of agent. Or, if the hereby confirm	to comply with the provisions of a my duties, and I am familiar with	gent and agree to act in this capacity. all statutes relative to the proper and complete In and accept the obligation of my position as reg to reflect a change in the registered office addre tified in writing of this change.	istered ess, I	
By: Dunie	august	11/07/2013		_
/ D Sig	nature of Registered Agent	Date		
If signing on be	chalf of an entity:			
Sylvia Queppe	t, Assistant Vice President	_		
7	yped or Printed Name			

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