## F15000001002

(Requestor's Name)					
(Address)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Sacritos Error) (Vario)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
3					

Office Use Only



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04/07/21--01024--008 \*\*35.00

2021 APR - 7 PH 4: 38 SECRETARY OF STATE

RA/RO/Change Ctint



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: April 5, 2021

Order#: 741611-005

Re: SLK AMERICA, 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: 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 ch	ange is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida St a organized under the laws of the State of $N$	IV	<i>s</i>
		registered agent, or both, in the State of Flo ic	vrida.	
	the corporation: SLK AMERICA IN			
2. The principal	office address: 507 WEXFORD C	T, SAIRT CHARLES, IL 60175		
3. The mailing	address (if different):			<del></del>
4. Date of incor	poration/qualification: 03/09/2015	Document number: F1500000	1002	
5. The name and Florida Depa	d street address of the current regis rtment of State: (If resigned, enter i	tered agent and registered office on file with resigned)	i the	
	NRAI SERVICES, INC.			
	1200 SOUTH PINE ISLAND RE	)		
	PLANTATION, FL 33324		33. 13.	202
6. The name and (if changed):	d street address of the new registere	ed agent (if changed) and /or registered offic	CRETAR	1 APR -7
	Corporation Service Company		ASS	
	1201 Hays Street	_	in S Figure	PH =
	PO Box NOT accepable			<del>:.</del> သ
	Tallahassee	FL 32301	' ITT	88
The street address changed will	ss of its registered office and the be identical.	street address of the business office of its r	egistered	agent,
Such change wa authorized by th	is authorized bo resolution duly ac the board, or the corporation has be	dopted by its board of directors or by an of en notified in writing of the change.	Ticer so	
	234-	B.R. Jayakumar - Secretary		
, 218uetri	e of an offiler or director	Printed or typed name and title		
I hereby accept I further agree t of my duties, an document is beit corporation has Corporation	the appointment as registered age o comply with the provisions of a of am familiar with and accept the of am familiar with and accept the of the charge been notified in writing of this ch of Service Company	ent and agree to act in this capacity. Il statutes relative to the proper and comple se obligation of my position as registered a s in the registered office address. I hereby tange.	ete perfor gent. Or confirm t	mance if this at the
	Kindly Dature of Registered Agent	04/01/2021		
Sign	inture of Registered Agent	Date		
If signing on bel	nalf of an entity:			
Grace E. Kirby,	Asst. Vice President			
Ty	ped 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 (04/13)