F1500000 5104

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(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Narr	ne)
(Do	ocument Number)	·
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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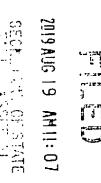
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S TALLENT AUG 2 2 2019



RIA



August 7, 2019

ATTN: MATTHEW ERMAK C/O CORPORATION SERVICE COMPANY 251 LITTLE FALLS DRIVE WILMINGTON, DE 19808

SUBJECT: SKYLINE BUILDING SYSTEMS (USA) INC.

Ref. Number: F15000005104

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

THERE IS A FEE BALANCE OF \$10.00 STILL DUE.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 019A00016188

RECEIVED

AUG 1 6 7019



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Matthew Ermak matthew.ermak@cscglobal.com

Date: July 29, 2019

Order#: 856088-008

Re: SKYLINE BUILDING SYSTEMS (USA) INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

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: Matthew Ermak 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	inge is submitted for a corporation	7.0302, 607.1308, or 617.1308, Floriaa Stat. organized under the laws of the State of <mark>Del</mark> a registered agent, or both, in the State of Flor.	aware
1. The name of t	the corporation: SKYLINE BUILDIN		
2. The principal	office address:		
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 11/17/2015	Document number: F15000005	104
	f street address of the current registerment of State: (If resigned, enter re	ered agent and registered office on file with t esigned)	he
	CAPITOL CORPORATE SERVIC	ES, INC.	
	515 EAST PARK AVENUE 2ND F	-L	
	TALLAHASSEE	FL 32301	2019 AUG 19
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			
	Corporation Service Company		A TI
	1201 Hays Street		: 07
	Tallahassee	n NOT acceptable FL 32301	() ;
The street addreas changed will	ess of its registered office and the s be identical.	street address of the business office of its re	gistered agent.
Such change wa	as authorized by resolution duly ad ne board, or the corporation has be	lopted by its board of directors or by an offi- en notified in writing of the change.	cer so
Lie & Cionii		Jill Cilmi, Vice President	
I hereby accept I further agree of agent. Or, if th hereby confirm Corporatio	to comply with the provisions of al my duties, and I am familiar with	· · · · · · · · · · · · · · · · · · ·	registered
By: 1 Ina	nature of Registered Agent	07/26/2019 Date	
If signing on be	half of an entity:		
Grace E. Kirby,	, Asst. Vice President		
·i.	and as Deintad Noma		

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