F19000001435

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

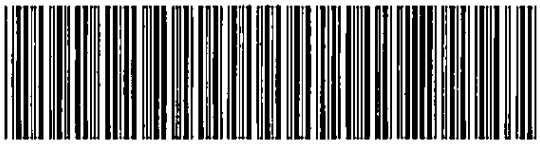
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200335822952

FILED
2018 DEC -6 P 3:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 09 2018
T. LEWIS

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 032878 8115411

AUTHORIZATION :

COST LIMIT : $ 35.00

ORDER DATE : November 1, 2019

ORDER TIME : 3:34 PM

ORDER NO. : 032878-090

CUSTOMER NO: 8115411

CHANGE OF AGENT

NAME: GENEX COOPERATIVE COMPANY

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX_____ PLAIN STAMPED COPY

CONTACT PERSON: Amanda Robinson #629168

EXAMINER'S INITIALS: _____

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of MINNESOTA *in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: GENEX COOPERATIVE COMPANY

2. The principal office address: 117 E GREEN BAY STREET, SHAWANO, WI 54166-0469 WI

3. The mailing address (if different): PO BOX 469, SHAWANO, WI 54166

4. Date of incorporation/qualification: 03/11/2019 Document number: F19000001425

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

TUPPER, DALTON

4005 STORY RD

SAINT CLOUD FL 37442-8916

2019 DEC -6 P 3:42
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

1201 Hays Street

P.O. Box NOT acceptable

Tallahassee FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

David E Mellinger — Signature of an officer or director

David Mellinger, Treasurer — Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company

By: Roxanne Turner — Signature of Registered Agent

12/6/2019 — Date

If signing on behalf of an entity:

Roxanne Turner
Asst. Vice President

Typed 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)