## F2400000 1129

(Requestor's Name)			
(Address)			
	<del></del>		
(	Address)		
	City/State/Zip/Phone #)		
·	,		
PICK-UP	WAIT MAIL		
(Business Entity Name)			
(Document Number)			
Codified Copies	Certificates of Status		
Certified Copies	Centificates of Status		
Special Instructions to 5	Tiling Officer		
Special Instructions to F	-ming Officer.		
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	OCT 3120		
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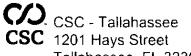
Office Use Only



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Tallahassee, FL 32301-2607 850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations From: Amanda Miller - Amanda Miller@cscglobal.com

Ext: x62969 Date: 10/30/24 Order #: 1667781-1

Re: Ennismore Holdings US Inc.



## TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$35.00 - FL State Account Number: I20000000195

Please take the following action:

File on a routine basis Issue proof of filing Return evidence to the following: ATTN: Amanda Miller c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

## Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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

statement of ch	ange is submitted for a corpora	2, 617.0502, 607.1508, or 617.1508, Florida Statutes, this tion organized under the laws of the State of Delaware e or registered agent, or both, in the State of Florida.
L. The name of	the corporation: ENNISMORE	HOLDINGS US INC.
	l office address: 251 LITTLE FA	
WILMINGTON		
3. The mailing:	address (if different):	
		024 Document number: F24000001129
5. The name an		egistered agent and registered office on file with the
	C T CORPORATION SYST	ЕМ
	1200 SOUTH PINE ISLAND	ROAD
	PLANTATION	FL 33324
6. The name an (if changed):	-	stered agent (if changed) and /or registered office  ny  G
	1201 Hays Street	
	Tallahassee	
an enanged with	. oo idamica.	the street address of the business office of its registered agent
Such change wanthorized by t	he board, or the corporation h	ly adopted by its board of directors or by an officer so as been notified in writing of the change.
/s/ Philippe	Zrihen	Philippe Zrihen, Authorized Person
I hereby accep I further agree of my duties, a document is be corporation ha	ure of an officer or director  If the appointment as registered  To comply with the provisions  Ind I am familiar with and acce-  eing filed merely to reflect a ch  is been notified in writing of th  on Service Company	Printed or typed name and title  If agent and agree to act in this capacity, of all statutes relative to the proper and complete performance of the obligation of my position as registered agent. Or, if the ange in the registered office address, I hereby confirm that th is change.
<del></del>	ce E. Kirby	10/30/2024
	enature of Registered Agent	Date
	, Asst Vice President	<u></u>
·	Typed or Printed Name	H ING PEP 035 00 4 4 4
	***E	ILING 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)