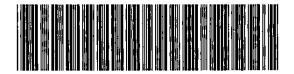
F94000002617

((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



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06/27/16--01018--015 **35.00

2815 JUN 27 PH 9: 00

JUN 3 0 2016 C. CARROTHERS



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: June 23, 2016

Order#: 178730-007

Re: SOPREMA, 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: Janis M. Smith 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

	•	502, 617.0502, 607.1508, or 617.1508, Florida Statute		
		ration organized under the laws of the State of <mark>OHIO</mark> lice or registered agent, or both, in the State of Florida		
	he corporation: SOPREMA,		···	
• •	office address:AL DRWADSWORTH OH 4	14281		
3. The mailing a	ddress (if different):			
4. Date of incorporation/qualification: 05/24/1994 Document number: F940000026			7	_
	street address of the current tment of State: (If resigned,	t registered agent and registered office on file with the enter resigned)	;	
	NRAI SERVICES, INC			
	1200 SOUTH PINE ISLAND ROAD		2716.	
	Plantation	FL 33324	CRETARY LAHASS	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office			
	Corporation Service Comp	any	9: 00 JANE JARIO	
	1201 Hays Street		***	
	Tallahasasa	P.O. Box NOT acceptable		
	Tallahassee	FL 32301		
The street address changed will	ess of its registered office and be identical.	nd the street address of the business office of its regis	stered agent,	
		duly adopted by its board of directors or by an office has been notified in writing of the change.	r so	
Xee (2 agric	Jill Cilmi, Vice President		
further agree I performance of agent. Or, if this hereby confirm Gorporatio	the appointment as register to comply with the provision my duties, and I am familia is document is being filed m	Printed or typed name and title red agent and agree to act in this capacity. as of all statutes relative to the proper and complete r with and accept the obligation of my position as re erely to reflect a change in the registered office addi en notified in writing of this change. Date	gistered ress, I	
	half of an entity:	1740		
	Asst. Vice President			
	ped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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