## Requester's Name GOLD CONTAINER CORP. EUROPEAN OFFICE TOUR ARAGO - 5, rue Bellini 92806 PUTEAUX LA DEFENSE FRANCE Tél: 01.46.96.18,10

Office Use Only

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

| 1.                                                          | an nga nga nga nga nga nga nga nga nga n                                                                                                                                                                  |          |
|-------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| (Corporation Name) 2.                                       | (Document#) 500008476945\$ -10/21/0201028025 *****35.00 ******35.00                                                                                                                                       | <b>∃</b> |
| (Corporation Name)                                          | (Document #)                                                                                                                                                                                              |          |
| 3. (Corporation Name)                                       | (Document #)                                                                                                                                                                                              | ٠٠,      |
| 4. (Corporation Name)                                       | (Document #)                                                                                                                                                                                              |          |
| ☐ Walk in ☐ Pick up time                                    | Certified Copy                                                                                                                                                                                            |          |
| ☐ Mail out ☐ Will wait                                      | Photocopy Certificate of Status                                                                                                                                                                           |          |
| NEW FILINGS                                                 | AMENDMENTS &                                                                                                                                                                                              |          |
| Profit Not for Profit Limited Liability Domestication Other | Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger                                                                                                  | ,        |
| OTHER FILINGS                                               | REGISTRATION/QUALIFICATION                                                                                                                                                                                |          |
| Annual Report Fictitious Name                               | Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger  REGISTRATION/OUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other  Examiner's Initials |          |
|                                                             | Examiner's Initials                                                                                                                                                                                       |          |

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## 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, the                                                                                                                                                                                                                                                                                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| undersigned corporation organized under the laws of the State of _DELAWARE                                                                                                                                                                                                                                                                                                                     |
| submits the following statement in order to change its registered office or registered agent, or both, in the                                                                                                                                                                                                                                                                                  |
| State of Florida.                                                                                                                                                                                                                                                                                                                                                                              |
| 1. The name of the corporation: (TOLD CONTAINER CORPORATION)                                                                                                                                                                                                                                                                                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                |
| 2. The mailing address of the corporation: 169 E. FLAGER STREET, SUITE 730                                                                                                                                                                                                                                                                                                                     |
| MIAMI, FL 33131                                                                                                                                                                                                                                                                                                                                                                                |
| 3. Date of incorporation/qualification: <u>OCTOBER</u> 8, 1997 Document number: <u>F9700005,5286</u>                                                                                                                                                                                                                                                                                           |
| 4. The name and address of the current registered agent and registered office:                                                                                                                                                                                                                                                                                                                 |
| WEBER TOM                                                                                                                                                                                                                                                                                                                                                                                      |
| 2137 TACKSONVILLE ST.                                                                                                                                                                                                                                                                                                                                                                          |
| FT. MVERS: FL 33931                                                                                                                                                                                                                                                                                                                                                                            |
| 5. The name and address of the new registered agent (if changed) and /or registered office (if changed):                                                                                                                                                                                                                                                                                       |
| WALEWSKI, FABRICE                                                                                                                                                                                                                                                                                                                                                                              |
| 169 E. FLAGLER STREET SUITE 730                                                                                                                                                                                                                                                                                                                                                                |
| MIAMI, FL 33131                                                                                                                                                                                                                                                                                                                                                                                |
| 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 daily adopted by its board of directors or by an officer so authorized by the board.                                                                                                                                                                                                                                                                  |
| 09/10/02                                                                                                                                                                                                                                                                                                                                                                                       |
| (Signature of an officer chairman or vice chairman of the board) (Date)                                                                                                                                                                                                                                                                                                                        |
| WALEWSKI FABRICE VICE PRESIDENT (Printed or typed name and title)                                                                                                                                                                                                                                                                                                                              |
| Having been named as registered agent and to accept service of process for the above stated corporation, 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 |
| performance of my duties, and I am familiar with and accept the obligation of my position as                                                                                                                                                                                                                                                                                                   |
| registered agent.  19/10/02                                                                                                                                                                                                                                                                                                                                                                    |
| $\sim$ 011010 $\sim$                                                                                                                                                                                                                                                                                                                                                                           |
| (Signature of Registered Agent) (Date)                                                                                                                                                                                                                                                                                                                                                         |
| If signing on behalf of an entity:  WALENSKI, FABRICE  VICE PRESIDENT                                                                                                                                                                                                                                                                                                                          |
| (Typed or Printed Name) (Capacity)                                                                                                                                                                                                                                                                                                                                                             |
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\* \* \* FILING FEE: \$35.00 \* \* \*