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Division of Corporations

Fax Number : (850)617-6380

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338

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**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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REGISTERED AGENT CHANGE CONTINENTAL CARBONIC PRODUCTS, INC.

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Help

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

statement of cha	nge is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida Statutes, to on organized under the laws of the State of <mark>Illinois</mark> or registered agent, or both, in the State of Florida.	his
		. CARBONIC PRODUCTS, INC.	
	office address: 3985 E. HARRISO		
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 11/03/199	Document number: F97000005819	
	I street address of the current reg tment of State: (If resigned, ente	istered agent and registered office on file with the resigned)	
	CORPORATION SERVICE CO	MPANY	- ·
	1201 HAYS STREET TALLAH.		
6. The name and (if changed):	street address of the new register	ered agent (if changed) and /or registered office	1,500
	1200 South Pine Island Road		
		P.O. Box NOT acceptable	
	Plantation, Florida 33324		
		ne street address of the business office of its register	
Such change wa authorized by th	is authorized by resolution duly ne board, or the corporation has	adopted by its board of directors or by an officer so been notified in writing of the change.	5
	1/2-	Jennifer Kurz, Secretary	
I hereby accept I further agree to of my duties, an document is hei	e been noujiea in writing of this	Printed or typed name and title agent and agree to act in this capacity. agent and agree to act in this capacity all statutes relative to the proper and complete per t the obligation of my position as registered agent age in the registered office address, I hereby confirm change	formance Or, if this n that the
Lefter	~ \200 \	09/29/2020	
	muni of Registered Agent half of an entity:	Date	
Stephanie Boehn	ı, Asst Secretary		
	ped or Printed Name	_	

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

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By: