Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Email Address:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I2000000195

: (850)521-1000

Phone Fax Number

: (850)558-1.515

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

REGISTERED AGENT CHANGE CUSTOM HOUSE (USA) LTD. INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

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

statement of char	rovisions of sections 607.0502, 617.0502, age is submitted for a corporation organize to change its registered office or registere	ed under the laws of the .	State of Washington	
1. The name of tl	ne corporation: CUSTOM HOUSE	(USA) LTD. INC.		
2. The principal of	office address: 517 Fort Street			
3. The mailing ac	Victoria BC V8W1E	-7 CK		
4. Date of incorp	oration/qualification: 08/07/1998	Document number:	F98000004503	
5. The name and Florida Depart	street address of the current registered age	nt and registered office of	on file with the	
	CT Corporation System			
	1200 South Pine Island Road			32
	Plantation, FL 33324			GE.
6. The name and (if changed):	street address of the new registered agent	(if changed) and /or regi	stered office	ECRETA SEE, FLOW
	Corporation Service Company			.4.
	1201 Hays Street			
	(P.O. Box NOT acceptable)		,	•
	Tallahassee, FL 32301			
The street addre as changed will	ss of its registered office and the street ac be identical.	ddress of the business o	ffice of its registered agent,	,
Such change wa authorized by th	is authorized by resolution duly adopted le board, or the gorporation has been not	by its board of directors fied in writing of the ch	or by an officer so lange.	
Lenn	re or an odpyer or director)	Blanca Lozada, Atto	mey in Fact	
I hereby accept I further agree t of my duties, an document is beli corporation has Corporat By:	the appointment as registered agent and o comply with the provisions of all statut of I am more than the oblight accept the obligh gifted merely to reflect a change in the been notified in writing of this change. ion Service Company		acity, r and complete performanc registered agent. Or, if thi ss, I hereby confirm that the	e s :
If signing on be	half of an entity:			
	pet, Assistant VP	•		
(T	yped or Printed Name)			
* * * FILING FEE: \$35.00 * * * MAND CHECKE DAVABLE TO BLODINA DEBARTAGENT OF STATE				

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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