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CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Dana Szymanski dana.szymanski@cscglobal.com

Date: October 17, 2017

Order#: 871401/005

Re: DECORATING AND COATING APPLICATIONS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Dana Szymanski c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

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

INCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	Name of the limited liability company: DECORATING AND COATING APPLICATIONS, LLC							
2	(a)			(b)					
	(4)	Principal office address of limited li (Note: MUST BE STREET A	ability company:	_ (5)	M	ailing address of limited l			
		6550 MCDONOUGH DRIVE		_	6550 MCD	ONOUGH DRIVE			
		NORCROSS	GA 30093	_	NORCRO	SS, GA 30093	·		
		04/08/2010		_	L1000003				
3.		Date of filing/registration in	ı Florida	4.	Ţ,	Document number			
5.	(a)								
		Registered Agent and Registered Office shown on the records of the Florida Dept. of State:							
			, <u></u>						
•	-	Registered Office Address (MUST BE F	<u>DDRESS)</u>			17 (
		1200 SOUTH PINE ISLAND RD					B .		
	٠.	PLANTATION	, FL_	33324		<i>;</i>	Name .		
						• • • • • • • • • • • • • • • • • • •	冠		
	(b)								
		Enter name of <u>NEW Registered Agent</u> and)ffice a <u>dd</u>	ress:		24			
		1201 Hays Street							
		NEW Registered Office Address:							
		Tallahassee	, FL_	32301					
the ag	e cha ent v as/wo	imited liability company is not organing or changes are made, the Florida will be identical. Or, in the case of a cre authorized by an affirmative vote cles of organization or the operating	a street address of t Florida limited lial of the members of	the regis bility co the limi	tered office mpany, it is ted liability	and the business offi hereby confirmed the company or as other	ce of the registered at the change(s)		
/S/ MIESHA MCCLURE MIESHA MCCLURE, AUTHORIZED PE									
	_	ture of a member or authorized representative				Printed or typed name of	•		
pr the	oviși e obl mer tifie	by accept the appointment as registe ons of all statutes relative to the pro- igations of my position as registered ely reflect a change in the registered I in writing of this change.	red agent and agre per and complete t agent as provided office address, I h	ee to act performa I for in C ereby co	in this capa ince of mv d hapter 605, infirm that th	city. I further agree luties, and I am famil F.S. Or, if this docu he limited liability co	to comply with the iar with and accept ment is being filed impany has been		
		Inace Z. Kinby	 	DV. CP	. C.C. C. U.S.S.	A	DENT		
51	gnatu	re of Registered Agent Corporation Ser	vice Company	BT: OK	ACE E. KIKB	Y, ASST. VICE PRESI	DENT		

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2.	(a)			(b)			_		
	(-) .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
		6550 MCDONOUGH DRIVE		_	6550 MC	DONOUGH DRIVE			
		NORCROSS	GA 30093	_	NORCROSS, GA 30093				
		04/08/2010			L100000	37876			
3.		Date of filing/registration in	ı Florida	4.		Document num	ber		
5.	(a)	CT CORPORATION							
	` ′	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:							
٠		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						17 0	
		1200 SOUTH PINE ISLAND RD						B	
•		PLANTATION	, FL	33324			~	G	
						•		7. 1.	
	(b)	Corporation Service Company		-	(E)				
		Enter name of <u>NEW Registered Agent</u> and		<i>,</i> =	64				
		1201 Hays Street					•		
		NEW Registered Office Address:							
		 5							
						-			
		Tallahassee	, FL	32301					
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		MIESHA MCCLURE		MIE	SHA MCCL	URE, AUTHOR			
	•	ture of a member or authorized representative				Printed or typed r		_	
pro the to i	ovisi obl mer ufie	by accept the appointment as registe ons of all statutes relative to the pro igations of my position as registered ely reflect a change in the registered d in writing of this change.	red agent and agr per and complete agent as provided office address, I h	ee to act performe d for in C tereby co	in this cap ince of my hapter 605 infirm that	acity. I further duties, and I an i, F.S. Or, if thi the limited liab	agree t gamilio s docur ility cor	o comply with the ar with and accept nent is being filed npany has been	
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315	<u>s</u> nan	re of Registered Agent Corporation Sci	vice Company	DI. GK	TOL II, KIK	JULY LEGY LE	I KTOIL	/ L. ()	