MD3000000500

(Re	questor's Name)						
(Ade	dress)						
(Add	dress)						
(Cit	y/State/Zip/Phone	e #)					
PICK-UP	☐ WAIT	MAIL					
(Business Entity Name)							
(Document Number)							
Certified Copies	_ Certificates	s of Status					
Special Instructions to Filing Officer:							

Office Use Only



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RA RO CO. 8, 14



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby gkirby3@cscinfo.com

Date: September 26, 2014

Order#: 310668-011

Re: XL ADHESIVES, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

<u>XX</u> File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Grace Kirby 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 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	ame of the limited liab	oility company:	XL ADHESIV	/ES, LLC				
2	(a)	1400 Tiarco Dríve			(h)	(b) 1400 Tiarco Drive			
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		Dalton	GA	30721		Dalton	GA	30721	
		05/12/2003				M030000			
3.		Date of filin	g/registration in	n Florida	4.		Document number		
5.	(a)	C T Corporation S	System						
	` '	Registered Agent and Re	gistered Office sho	wn on the records	of the Florida	Dept. of Stat	- e:		
		1200 South Pine Is	land Road						
		Registered Office Address (MUST BE FLORIDA STREET AD			T ADDRESS)		-	<u> </u>	
								SET THE	
							-		
		Plantation			FL 33324			29	
							-	基	
	(b)	Corporation Service Company						Q E	
	• /	Enter name of NEW Registered Agent and/or NEW Registered Office address:				-	22		
								<i>c</i> o +	
		1201 Hays Street							
		NEW Registered Office	Address:				-		
							_		
		Tallahassee		,	FL 32301		_		
the ag wa	e cha ent v as/w	inge or changes are m will be identical. Or, i	ade, the Florida in the case of a offirmative vote	street address Florida limited of the member	of the regist I liability cons s of the limithe limithe limithed li	tered officempany, it is ted liability ability con	orida, it is hereby confine and the business offices hereby confirmed that y company or as other inpany.	ce of the registered at the change(s)	
Signature of a member or authorized representative of a member				Printed or typed name of signee					
pr the to no	ovisi e obl mer tifie	ions of all statules religions of all statules religions of my position ely reflect a change in din writing of this chi	alive to the projon as registered a the registered ange.	per and comple agent as provi office address,	ele performa ided for in C . I hereby co	nce of mỹ hapter 60: nfirm that	acity. I further agree that the same and I am familis, F.S. Or, if this documents the limited liability con	ar with and accept ment is being filed mpany has been	
Si	gnatu	re of Registered Agent Ca	omoration Ser	vice Company	v BY Gr	ace E. Ki	rhy Assistant Vice P	resident	