## MU1000004909

(Requestor's Name)				
(Address)				
(Address)				
<del></del>	(City/State/Zip/Phone #)			
PICK-UP	P WAIT MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				
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Office Use Only



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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: Ami Casper ami.casper@cscglobal.com

Date: September 5, 2018

Order#: 364942-011

Re: SAFE-GUARD PRODUCTS INTERNATIONAL, 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 Please return evidence to the following:

Attn: Ami Casper c/o Corporation Service Company 251 Little Falls Drive 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.	Name of the limited liability company: _SAFE-GUARI	D PRODUCTS	SINTERNATIONAL, LLC
2. (a	) Two Concourse Parkway, Suite 500	(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BON)
	Atlanta, GA 30328	<del></del> _	
	08/10/2007	M	07000004909
3.	Date of filing/registration in Florida	4.	Document number
5. (	n) NRAI, Services, Inc.		
,	Registered Agent and Registered Office shown on the records of	f the Florida Dep	t. of State:
	1200 South Pine Island Road		
	Registered Office Address (MUST BE FLORIDA STREET	'ADDRESS)	
	Plantation F	L33324	
(b	Corporation Service Company		第2 名 円
()	Enter name of NEW Registered Agent and/or NEW Registered	d Office address	<u> </u>
	1201 Hays Street		——
	NEW Registered Office Address:		15 - 18 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
		· · · · · · · · · · · · · · · · · · ·	
	Tallahassee	L_32301	
the c agent was/	e limited liability company is not organized under the la hange or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited l were authorized by an affirmative vote of the members rticks of organization or the operating agreement of the	of the registere iability compa of the limited	d office and the business office of the registered any, it is hereby confirmed that the change(s) liability company or as otherwise provided in
	Xie & agnie	Jill Cilmi	i, Authorized Person
Sig	nature of a member or authorized representative of a member	<del></del>	Printed or typed name of signee
provi the o	reby accept the appointment as registered agent and ag isions of all statutes relative to the proper and complete bligations of my position as registered agent as provide prely reflect a change in the registered office address, I ted in writing of this change	gree to act in t e performance ed for in Chap Thereby confir	his capacity. I further agree to comply with the cof my duties, and I am familiar with and accept over 605, F.S. Or, if this document is being filed muthat the limited liability company has been
(	Cermsel	par : : :	
Signa	ture of Registered Agent Corporation Service Company	BY: Ami l	M. Casper, Asst. Vice President