(F	Requestor's Name)	*****. <u> </u>			
	Address)	***			
	Address)				
(-	(daless)				
(City/State/Zip/Phone #)					
PICK-UP	WAIT	MAIL			
(E	Business Entity Name)			
	Document Number)				
(-					
Certified Copies Certificates of Status					
Special Instructions to F	Filing Officer:	i			
	J. HORN	. 			
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Office Use Only



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CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195						
REFERENCE : 9677207731108						
AUTHORIZATION: Spellered.						
COST LIMIT : \$ 25.00						
ORDER DATE : September 22, 2022						
ORDER TIME : 1:54 PM						
ORDER NO. : 967720-194						
CUSTOMER NO: 7731108						
CHANGE OF AGENT						
NAME: VILTER MANUFACTURING LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Eyliena Baker						
EXAMINER'S INITIALS:						

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. N	lame of the limited liability company:	UFACTUR			
		(1			-
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	((Mailing	g address of limited liability company: e: MAY BE POST OFFICE BOX)	-
	5555 S PACKARD AVENUE		PO BOX 669		
	CUDAHY, WI 53110-8904		SIDNEY, OH 4	5365-0669	<u>-</u> -
	10/03/2007		M07000005935		
3.	Date of filing/registration in Florida	4.	Docu	ment number	-
5. (a					
J. (a	Registered Agent and Registered Office shown on the records of	of the Florida	Dept. of State:		
	C T CORPORATION SYSTEM		•		
	Registered Office Address (MUST BE FLORIDA STREET	T ADDRESS	7	200	
	1200 S PINE ISLAND RD		_	FII 2022 OCT FALL AND	
	PLANTATION F	33324		CT-6 M 8:5	
		L		7-6 ≥ 8:57	
(b)		·		= ラ	
	Enter name of NEW Registered Agent and/or NEW Registers	ed Office ad	dress:	- φ 	
	Corporation Service Company				A. (1)
	NEW Registered Office Address:	<u>-</u>			
	1201 Hays Street				
	Tallahassee	32301			
		<u> </u>			
change agent was/w the art	limited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the JILL CILMI	ne registere liability co of the lim e limited l	d office and the b mpany, it is hereb ited liability comp	pusiness office of the registered by confirmed that the change(s) pany or as otherwise provided in	
Signa	iture of a member or authorized representative of a member			d or typed name of signee	•
provis the ob to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, I d in writing of this change.	e performa led for in C Thereby co	nce of my duties, hapter 605, F.S. nfirm that the lim	and I am familiar with and accept Or, if this document is being filed ited liability company has been	
<u>e:</u>	Chace Cokuble	GRACI:	E. KIKBY, ASS	T. VICE PRESIDENT	
ાકાશાહ	re of Registered Agent				