MOTOD 06 263

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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19 OCT TO MATE 28
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T SCHROEDER



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: October 8, 2019

Order#: 929194-103

Re: BUNZL NORTHEAST, 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

STÂTEMENT 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	ame of the limited liability company: BUNZL NORTH	HEAST, LLC		
2. (a)	One CityPlace Drive, Suite 200 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	St. Louis, MO 63141			
	10/18/2007	M	07000006263	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Corporate Creations Network Inc.			
• •	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
	11380 Prosperity Farms Road, #221E		A	
	Registered Office Address (MUST BE FLORIDA STREET)	19 OCT		
			25 <u>2</u> <u>1</u>	
	Palm Beach Gardens . FL	. 33410		
(b)	Corporation Service Company		—————————————————————————————————————	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address	£	
	1201 Hays Street			
	NEW Registered Office Address:			
		··-		
	Tallahassee , FL	32301		
the cha agent v was/wa the arti	imited liability company is not organized under the lavinge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited liagraphy that is a suthorized by an affirmative vote of the members of the of organization or the operating agreement of the	the registere ability compart of the limited limited 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 lity company. Authorized Person	
	member or authorized representative of a member		Printed or typed name of signee	
provisi the obl to mero notified	by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete igutions of my position as registered agent as provided by reflect a change in the registered office address. It is writing of this change. The of Registered Agent Corporation Service Company	performance d for in Chap hereby confir	of my duttes, and I am familiar with and accept oter 605, F.S. Or, if this document is being filed	