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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053

Phone : (561)694-8107 Fax Number : (561)694-1639

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:				

LLC REGISTERED AGENT CHANGE EDGEWELL PERSONAL CARE, LLC

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MAY 28 2020

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

1. The name of the limited liability company is: Edgew	ell Personal Care, LLC	7021		
2. (a) Principal office address of the limited liability company:	6 Research Drive	7		
(Note: MUST BE STREET ADDRESS)	Shelton, CT 06484			
		7		
(b) Mailing address of limited liability company:	1350 Timberlake Manor Drive			
(Note: MAY BE POST OFFICE BOX)	Suite 300 Chesterfield, MO 63017			
		~		
	M08000004588	······································		
3. Date of filing/registration in Florida	4. Document number	_		
5.(a) Registered Agent and Registered Office shown of		tate:		
Registered Agent:	C T CORPORATION SYSTEM			
Registered Office Address:	1200 SOUTH PINE ISLAND ROAD			
	PLANTATION, FL 33324			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW R</u>	egistered Office address:			
NEW Registered Agent:	Corporate Creations Network Inc.			
NEW Registered Office Address:	801 US Highway I			
(MUST BE FLORIDA STREET ADDRESS)				
	North Palm Beach FL 33408			
If the limited liability company is not organized under the laws or changes are made, the Florida street address of the registered identical. Or, in the case of a Florida limited liability company, an affirmative vote of the members of the limited liability company the operating agreement of the limited fiability company.	office and the business office of the registered it is hereby confirmed that the change(s) was/s	agent will be were authorized by		
(Signature of a member or authorized representative of a member)				
Anthony Dispenza, Attorney-in-Fact				
I hereby accept the appointment as registered agent and agree of all statutes relative to the proper and complete performance my position as registered agent as provided for in Chapter 605, in the registered office address. I hereby confirm that the limited Anthony Dispenza, Special (Signature of Registered Agent)	of my duties, and I am familiar with and accep F.S. Or, if this document is being filed to mer. I liability company has been notified in writing Secretary	t the obligations of ellipsely reflect a change		
Division of Corporations, P.O. B	ox 6327, Tallahassee, FL 32314			
INRS18(19/9) Corporate Creations International				
801 US Highway 1				
North Palm Beach FL 33408 (561) 694-8107				