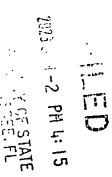
M13000005630

(R€	equestor's Name)					
()						
(Ac	idress)					
(Address)						
(Cit	ty/State/Zip/Phone	e #)				
PICK-UP	MAIT	MAIL				
(Bu	isiness Entity Nan	ne)				
(Do	ocument Number)					
,	,					
Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						

Office Use Only



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RECEIVED

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

ACCOUNT NO. : I2000000195						
REFERENCE : 776166 7454087						
AUTHORIZATION: Squindle man						
COST LIMIT : \$ 25.00						
ORDER DATE: May 30, 2023						
ORDER TIME : 2:22 PM						
ORDER NO. : 776166-005						
CUSTOMER NO: 7454087						
CHANGE OF AGENT						
NAME: BRENNTAG GLOBAL MARKETING, LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Alexxis Weiland-sorenson						
EXAMINER'S INITTALS:						

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	me of the limited liability company: BRENNTAG GL	OBAL I	MARKETING	3. LLC
2.	(a)		(b)	
	(/	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `	-, <u></u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		5083 Pottsville Pike		5083 Pot	tsville Pike
		Reading, PA 19605		Reading,	PA 19605
		09/06/2013		M1300000	5630
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)				
٠,	(4)	Registered Agent and Registered Office shown on the records of C T CORPORATION SYSTEM	the Floric	la Dept, of Stat	e:
Registered Office Address (MUST BE FLORIDA STREET)				<u> </u>	292
	1200 SOUTH PINE ISLAND ROAD				
		PLANTATION . FL	33324		2023 C. 1 - 2 PM 4: 15
					P III
	(b)	Enter name of NEW Registered Agent and/or NEW Registered			- Ens
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	ddress:	. FAT I
		Corporation Service Company			m o
		NEW Registered Office Address:			-
		1201 Hays Street		<u>.</u>	_
		Tallahassee . FL	32301		
cha age wa the	ange ent w s/we arti-	mited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the JILL CILMI	register bility co f the lir limited	ed office an ompany, it is nited liabilit liability con	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in a pany. AUTHORIZED PERSON
	_	ure of a member or authorized representative of a member			Printed or typed name of signee
pro the to	ovisie obli mere	by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete jeations of my position as registered agent as provided by reflect a change in the registered office address. I have the properties of this change.	ee to ac perform I for in sereby c	t in this cape ance of my e Chapter 605 onfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept i. F.S. Or, if this document is being filed the limited liability company has been
Sig	anatur	Linaco Z-Kubi e of Registered Agent	GRACI	E E. KIRBY	, ASST. VICE PRESIDENT