## M140000000167

(Requestor's Na	me)					
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT	MAIL					
(Business Entity	Name)					
(Document Number)						
Certified Copies Certified	cates of Status					
Special Instructions to Filing Officer						
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Office Use Only



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LLC PHIRD Change



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith jsmith2@cscinfo.com

Date: September 24, 2014

Order#: 298315-026

Re: SANDVIK CUSTOMER FINANCE 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: Janis M. Smith

c/o Corporation Service Company
2711 Centerville Road, Suite 400

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.

OUCA.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: _SANDVIK CUS	STOMER FIN	IANCE LLC		
2. (a	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited lia	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Smyrna, GA 30082				
2	01/09/2014		14000000167		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a	CT CORPORATION SYSTEM				
	Registered Agent and Registered Office shown on the records of	the Florida Dep	ot. of State:		
	1200 South Pine Island Road				
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)			
				7	JAT 3S
	Plantation , FL		<del></del>	SEP	CRET
				26	ASS FIL
(b)	Corporation Service Company			μ	HOW.
	Enter name of NEW Registered Agent and/or NEW Registered	Office address	;	မှာ	
					SEZ SEZ
	1201 Hays Street			ğ	₽ R
	NEW Registered Office Address:				
			<del></del>		
	Tallahassee	32301			
the chagent was/v	limited liability company is not organized under the law lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liawere authorized by an affirmative vote of the members of ticle of change and compared to the operating agreement of the	the registere ability compa of the limited limited liabil	d office and the business office my, it is hereby confirmed that liability company or as otherwi	of the re	egistered ge(s)
Sign	accordance of a member or authorized representative of a member	2011411	Printed or typed name of sig	nee	
provi: the ol to me	eby accept the appointment as registered agent and agricions of all statutes relative to the proper and complete bligations of my position as registered agent as provided rely reflect a change in the registered office address, I had in writing of this change.	ee to act in to performance d for in Chap hereby confir	his capacity. I further agree to of my duties, and I am familian ster 605, F.S. Or, if this docume that the limited liability comp	comply with an ent is being the part of the complex contraction of the contracti	with the ad accept ing filed been
Signal	ure of Registered Agent Corporation Service Company	BY: Grac	e E. Kirby, Assistant Vice Pro	esident	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00