M1400000 7451

(Red	questor's Name)					
(Add	lress)					
(Add	lress)					
(City	//State/Zip/Phone	e #)				
PICK-UP	☐ WAIT	MAIL				
(Bus	siness Entity Nar	me)				
(Document Number)						
Certified Copies	Certificate	s of Status				
Special Instructions to Filing Officer:						





400352878754

09/30/20--01003--013 **35.00

0 1 2) Ali 8: El

C GOLDEN

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	ECT: Kraemer North America, LLC Name of Limited Liability Company				
30202					
Dear Si	ir or Madam:				
The en	closed Registered Agent/Registered Offic	ce Change and fee(s) are submitted for filing.			
Please	return all correspondence concerning this	s matter to the following:			
	Jourdan Cerrillo				
-	Name of Person				
	DoMyLLC.com, LLC				
	Firm/Company				
	5716 Corsa Ave. · Suite 110) 			
	Address				
	Westlake Village, CA 91362-73	354			
	City/State and Zip Code				
	processing@domyllc.com				
E	-mail address: (to be used for future annu	al report notification)			
For fur	ther information concerning this matter,	please call:			
		888-366-9552			
	Name of Person	Area Code & Daytime Telephone Number			
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the following a	amount:			
	■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy			
INHS18	3 (2/14)				



5716 Corsa Ave Suite 110 Westlake Village, CA 91362

Phone: (818) 264-4266 Toll-Free: (888) 366-9552 Fax: (877) 366-9552 www.DoMyLLC.com

September 24, 2020

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Florida Secretary of State,

Enclosed please find the Change of Registered Agent and filing fee for Kraemer North America LLC.

Check #: 2393

Check Amount: \$25.00

Please return the documents once the filing is completed to:

DoMyLLC.com, LLC Attn: Processing 5716 Corsa Ave. Suite 110 Westlake Village, CA 91362

If you have any questions, please contact our office at (888)-366-9552.

Sincerely,

Processing@domyllc.com www.DoMyLLC.com

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: Kraemer No	rth Am	erica, LLC		 <u></u> -
2. (a)					
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of limited liabi	lity company: FICE BOX
	1 Plainview Rd		РО ВОХ	220	
	Plain, WI 53577		Plain, WI	53577	
	10/14/2014		M140000	07451	
3.	Date of filing/registration in Florida	— 4.		Document number	<u> </u>
5. (a.	REGISTERED AGENT SOLUTIONS, INC.				
J. (A	Registered Agent and Registered Office shown on the records	of the Fi	orida Dept. of Stat	_ te:	
	155 Office Plaza Dr. · Suite A		·		133
	Registered Office Address (MUST BE FLORIDA STREE	ETADDA		_	<u> </u>
	-				
	Tallahassee		32301	-	(3) (3)
		FL		_	2
(b)	InCorp Services, Inc.				
` ,	Enter name of NEW Registered Agent and/or NEW Register	red Offic	e address:	-	". ထ်
	17888 67th Court North				
	NEW Registered Office Address:			_	
	Loxahatchee		22470	_	
	Loxaliatinee	FL	33470	_	
chang agent was/w the art	limited liability company is not organized under the e or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the position agreement of the attree of a member or authorized representative of a member	the regis liability is of the he limit	tered office an company, it is limited liabilit	d the business office of the s hereby confirmed that the y company or as otherwise apany.	e registered e change(s) e provided in
the ob to mer	thy accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as providely reflect a change in the registered office address, and in writing of this change. Steven Pickett, obo Inc.	te perjo ded for I hereb	rmance of my o in Chapter 605 y confirm that	destina insel Laur Enseilieur	J
Signati	steven Pickets obo inc	wih zet	vices, Inc.		