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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: March 9, 2021

Order#: 686249-001

Re: VECTOR FOILTEC, LLC

Enclosed please find:

XX ___ Change of Registered Agent and Office.

 \underline{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: Erika Zavala Daza 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

2021 MAR 15 AM 7: 24

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.

ame of the limited liability company:		C	
55 LANE RD	(55 LANE	RD
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
STE 110		STE 110	
FAIRFIELD, NJ 07004	_	FAIRFIEL	D, NJ 07004
07/30/2015		M15000006	6037
Date of filing/registration in Florida	- 4.		Document number
INCORP SERVICES, INC.			
	the Florid	a Dept. of State	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			高
LOXAHATCHEE FL	33470		2021 HAR 15 AH 7: 24
Corporation Service Company NEW Registered Office Address:	Office ad	ldress:	çı ~ -
1201 mays Street			-
Tallahassee, FL	32301		
or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registere bility co f the lin	ed office and impany, it is lited liability	I the business office of the registered thereby confirmed that the change(s) company or as otherwise provided in
Lie E. Cienie	Jill I	Cilmi, Author	
by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I h	re to act perform I for in (ereby ca	in this capa ance of my d Thapter 605, onfirm that to	Printed or typed name of signee acity. I further agree to comply with the luties, and I am familiar with and accept, F.S. Or, if this document is being filed the limited liability company has been
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) STE 110 FAIRFIELD, NJ 07004 07/30/2015 Date of filing/registration in Florida INCORP SERVICES, INC. Registered Agent and Registered Office shown on the records of 17888 67TH CT NORTH Registered Office Address (MUST BE FLORIDA STREET ADDRESS) LOXAHATCHEE FL Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company NEW Registered Office Address: 1201 Hays Street Tallahassee FL imited liability company is not organized under the law or changes are made, the Florida street address of the organized by an affirmative vote of the members of icles of organization or the operating agreement of the case of a member of the members of the street address of all statutes relative to the proper and complete inguitons of my position as registered agent as provided by reflect a change in the registered office address. The first in writing of this change	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) STE 110 FAIRFIELD, NJ 07004 07/30/2015 Date of filing/registration in Florida 4. INCORP SERVICES, INC. Registered Agent and Registered Office shown on the records of the Florida 17888 67TH CT NORTH Registered Office Address (NUST BE FLORIDA STREET ADDRESS) LOXAHATCHEE FI. 33470 Enter name of NEW Registered Agent and/or NEW Registered Office and Corporation Service Company NEW Registered Office Address: 1201 Hays Street Tallahassee FI. 32301 imited liability company is not organized under the laws of the for changes are made, the Florida street address of the registere will be identical. Or, in the case of a Florida limited liability corre authorized by an affirmative vote of the members of the limiteds of organization or the operating agreement of the limited liability corre authorized representative to the proper and complete perform by accept the appointment as registered agent and agree to act ons of all statutes relative to the proper and complete performingations of my position as registered agent as provided for in Cell verificet a change in the registered office address, I hereby cell in writing of this change.	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) STE 110 STE 110 FAIRFIELD, NJ 07004 FAIRFIELD 07/30/2015 M1500000 Date of filing/registration in Florida INCORP SERVICES, INC. Registered Agent and Registered Office shown on the records of the Florida Dept. of State 17888 67TH CT NORTH Registered Office Address (NUST BE FLORIDA STREET ADDRESS) LOXAHATCHEE Enter name of NEW Registered Agent and/or NEW Registered Office address: Corporation Service Company NEW Registered Office Address: 1201 Hays Street Tallahassee FL 32301 imited liability company is not organized under the laws of the State of Floring and the Florida street address of the registered office and will be identical. Or, in the case of a Florida limited liability company, it is creationized by an affirmative vote of the members of the limited liability cless of organization or the operating agreement of the limited liability componed in the case of a provided for in Chapter 605 or or of an ember of a member of the minuted liability componed in the registered agent and complete performance of mix of my position as registered agent and complete performance of mix of a member of the proper and complete performance of mix of a my position as registered agent and complete performance of mix of a my position as registered agent as provided for in Chapter 605 and registered office address. Thereby confirm that it in writing of this change.

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

INHS18 (2/14)

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	une of the limited liability company: VECTOR FOILT	TEC, LLC	
2. (a)	55 LANE RD	(b)	E RD
2. (11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	STE 110	STE 110	
	FAIRFIELD. NJ 07004	FAIRFIE	LD, NJ 07004
	07/30/2015	M1500000	06037
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	INCORP SERVICES, INC.		
). (u)	Registered Agent and Registered Office shown on the records of	the Florida Dept, of Sta	te: 2
	17888 67TH CT NORTH	75. P. F.	
	Registered Office Address (MUST BE FLORIDA STREET)	E 15 2021 HAR 15 TALLAH	
	LOXAHATCHEE, FL	33470	R 15 AH 7: 24
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Corporation Service Company	Office address:	_ 24
	NEW Registered Office Address:		
	1201 Hays Street		_
	Tallahassee, FL	32301	_
change agent w was/wo the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registered office ar ability company, it is of the limited liability	nd the business office of the registered s hereby confirmed that the change(s) by company or as otherwise provided in
	ture of a member or authorized representative of a member	Jill Cilmi, Auth	
l herel provisi he obl o merc	ture of a member or authorized representative of a member by accept the appointment as registered agent and agri- ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. The I'm writing of this change,	ee to act in this cap performance of my I for in Chapter 602 iereby confirm that	Printed or typed name of signee activ. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
Š	Iraca Cottuble		
~	re of Registered Agent E. Kirby, Assistant Vice President of Corporation Service Comp	pany	

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

INHS18 (2/14)