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		Division of Corporations	
		Fax Number : (850)617-6380	
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-		Account Name : C T CORPORATION SYSTEM	
		Account Number : FCA000000023	
		Phone : (614)280-3338	
<u></u>		Fax Number : (954)208-0845	
-			
•••		the email address for this business entity to be used for future nual report mailings. Enter only one email address please.**	
:	Ema	ail Address:	

REGISTERED AGENT CHANGE HOERBIGER AMERICA HOLDING, INC.

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: <u>Hoerbiger America Holding</u>, Inc.

2. The principal office address: 1191 E NEWPORT CENTER DRIVE 210 DEERFIELD BEACH, FL 33442

3. The mailing address (if different):

4. Date of incorporation/qualification: <u>12/20/2005</u> Document number: <u>P05000165580</u>

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enterresigned)

	GRUBER, FRANZ			
	1358 W NEWPORT CENTER DRIVE		2020	N. 1
	DEERFIELD BEACH, FL 33442		2020 NOV	<u>6 (</u>
6. The name an (ifchanged):	d street address of the new registered agent (if changed) and /or registered offic	e -	17 AH	
	C T Corporation System		0	
	1200 South Pine Island Road	• •	04	

P.O. Box NO I acceptable

Plantation, Florida 33324

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Watale Fickory

Signature of an officer or director

Natalie Pickens-Secretary Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address. I hereby confirm that the corporation has been onlifted in writing of this change.

By:

Signature of Registered Agent

08/05/2020

Date

If signing on behalf of an entity:

Denise Bell Assistant Secretary

Typed or Printed Name

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 (CR2E045 (04/13)