

P17000033769

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS  
**SUBJECT:** \_\_\_\_\_  
Name of Corporation

**DOCUMENT NUMBER:** P17000033769

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Danielle Ryan-Praus

Name of Contact Person

Hinckley, Allen & Snyder LLP

Firm/Company

20 Church Street

Address

Hartford, CT 06103

City/State and Zip Code

mb@baltnav.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Danielle Ryan-Praus

Name of Contact Person

at ( 860 ) 331-2698

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



20 Church Street  
Hartford, CT 06103-1221  
p: 860-725-6200 f: 860-278-3802  
hinckleyallen.com

**Danielle Ryan-Praus**  
(860) 331-2698  
dpraus@hinckleyallen.com

September 6, 2017

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Statement of Change of Registered Office or Registered Agent or Both for Corporations

Dear Sir or Madam:

I enclose a Statement of Change of Registered Office or Registered Agent or Both for Corporations for filing with your office along with a check in the amount of \$35.00 for the filing fee.

Please send the filing confirmation to my attention in the self-addressed, stamped envelope.  
Thank you.

Thank you.

Very truly yours,

Danielle Ryan-Praus  
Paralegal

Enclosure

**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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: BALTNV US, INC.
2. The principal office address: c/o Hinckley, Allen & Snyder LLP, 20 Church Street,  
Hartford, CT 06103
3. The mailing address (if different): \_\_\_\_\_  
C/O BALTNV A/S, STRANDVEJEN 102E, 6, DK-2900 Hellerup, Denmark Attn: Michael Bonderup
4. Date of incorporation/qualification: 4/12/17 Document number: P17000033769
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Frank Eger

11706 MAJOR TURNER RUN

PARRISH, FL 34219

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

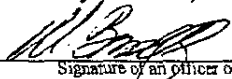
1201 Hays Street

P.O. Box NOT acceptable

Tallahassee FL 32301

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.

  
Signature of an officer or director

Michael Bonderup, Director

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 notified in writing of this change.*

  
Signature of Registered Agent

9/6/2017

Date

If signing on behalf of an entity:

Aleya Smith

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 (03/12)

**FILED**  
**SEP 13 PM 2:21**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**