Florida Department of State Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)205-0380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number: I2000000195 : (850)521-1000 Fax Number : (850)558-1575

## REGISTERED AGENT CHANGE

FUJI HUNT PHOTOGRAPHIC CHEMICALS, INC.

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

				617.1508, Florida Statu aws of the State of Dela			
				oth, in the State of Floric			
1. The name of	the corporation:	FUЛ HUNT PHOTOGI	RAPHIC CHEMIC	ALS, INC.			
	The name of the corporation: FUII HUNT PHOTOGRAPHIC CHEMICALS, INC.      The principal office address: 40 Boroline Road,						
		Allendale, NJ 07401					
3. The mailing a	iddress (if differ	ent):					
4. Date of incorp	poration/qualific	cation; January 28, 1988	Document	number: P17807			
	I street address of training of State:	of the current registered	agent and register	red office on file with the	•		
	Tim Kearney						
	50 Industrial Lo	op North		<u> </u>	章 5		
	Orange Park, F	L 32073			A STATE OF		
6. The name and (if changed):	l street address o	of the new registered ago	ent (if changed) ar	nd/or registered office	To the Con		
	Corporation Se	rvice Company	:- '				
	1201 Hays Stre				2		
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	Tallahassee, FL	· · · · · · · · · · · · · · · · · · ·					
				usiness office of its reg			
Such change was authorized by th	s authorized by c board, or the	resolution duly adopte corporation has been n	ed by its board of otified in writing	directors or by an office of the change.	er so		
	K		Jonathan File,	•			
• • /	to of an officer or dir	•		inled or typed name and title)	<del></del>		
I hereby accept I further agree to of my duties, and document is bein corporation has	the appointment o comply with the I I am familiar ng filed merely been notified it Service Compan	t as registered agent a he provisions of all sty with and accept the ob to reflect a change in to writing of this change 	nd agree to act in tutes relative to l ligation of my po he registered offic t.	this capacity, he proper and complete sition as registered age ce address, I hereby con	performance int. Or, if this if the the		
		•	3-	21-06			
201	surure of Registered	Agent)	<del> </del>	(Date)	<del></del>		
If signing on bel	nalf of an entity	•					
Sylvia Queppet, A							
(T)	ped or Printed Name	»)					

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