11/21/2016

**Di**vision of

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H160002872673)))



H160002872673ABC6

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 : (954)208-0845 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Fmail Address:			
	Email	Addance	

## REGISTERED AGENT CHANGE KUBOTA TRACTOR CORPORATION

0	0	Certificate of Status
0	0	Certified Copy
02	02	Page Count
\$35.00	\$35.00	Estimated Charge
_		

Electronic Filing Menu

Corporate Filing Menu

Help

ڣ

S TALLENT

NOV 2 2 2016

R/4-CH)

To: Page 4 of 4

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

statement of cha	ange is submitted for a corporatio	517.0502, 607.1508, or 617.1508, Florida Statut n organized under the laws of the State of <mark>Calito</mark> r registered agent, or both, in the State of Floria	rnia		
1. The name of	the corporation: KubotaTractorCor	poration			
2. The principal	office address: 3401DelAmoBlvc	I.,Torrance,CA90503			
3. The mailing a	address (if different):				
4. Date of incor	poration/qualification: 04/16/1991	Document number: P33591			
	d street address of the current regi- rtment of State:(If resigned, enter	stered agent and registered office on file with the resigned)	e		
	CorporationServiceCompany				
	1201HaysStreet		TAWE TO 3S.	<u>ත</u>	
	Tallahasseo,FL32301		<b>新</b> 居	NON 1	<u> </u>
6. The name an (if changed):	d street address of the new register	red agent (if changed) and /or registered office	H. F. S.	21 AM	ED
	CTCorporationSystem	<b>√</b>		9: 2	
	c/oCTCorporationSystem,1200	SouthPineIslandRoad	$\triangleright$	33	
	P.O.1 Plantation,Florida33324	Box NOT acceptable			
The street addr	ess of its registered office and the lbe identical.	street address of the business office of its regi	stered age	nt,	
Such change wanthorized by t	as authorized by resolution duly a he board, or the corporation has b	dopted by its board of directors or by an office open notified in writing of the change.	er so		
Jankon	flor	ClaireBuenatlor, VicePresident			
J	to of an officer or director	Printed or typed name and title		_	
I nereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered by to comply with the provisions of I'my duties, and I am familiar will is document is being filed merely that the corporation has been no	gent and agree to act in this capacity. ull statutes relative to the proper and complete h and accept the obligation of my position as re to reflect a change in the registered office add stified in writing of this change.	egistered Fess, I		
By: CTCor	porationSystem	11/18/2016			
	pulsare of Registered Agent	Taue		-	
If signing on bo	chalf of an entity:				
	AssistantSecretary	_			
	'yped 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, FL32314
CR2E045 (03/12)