

854323

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R.A. Chong

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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 405576 5018498

AUTHORIZATION : *Patricia Pigute*

COST LIMIT : \$ 35.00

ORDER DATE : June 2, 2005

ORDER TIME : 9:30 AM

ORDER NO. : 405576-055

CUSTOMER NO: 5018498

CUSTOMER: Michele Nelson
Anixter, Inc
2301 Patriot Boulevard
Glenview, IL 60026

CHANGE OF AGENT

NAME: ANIXTER INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman

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

1. The name of the corporation: ANIXTER INC.
2. The principal office address: 2301 Patriot Blvd.
Glenview, IL 60025
3. The mailing address (if different): _____

4. Date of incorporation/qualification: October 8, 1982 Document number: 854323

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

C T Corporation System

1200 South Pine Island Road

Plantation, FL 33324

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 or personal mailbox 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.

John Dul
(Signature of an officer or director)

John Dul, 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 notified in writing of this change.

Corporation Service Company

Jacqueline M. Giles
(Signature of Registered Agent)

June 03, 2005
(Date)

If signing on behalf of an entity:

Jacqueline M. Giles

(Typed or Printed Name)

Assistant Vice President

(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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