F0200001980

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	·· <u>·</u>
(City	//State/Zip/Phone	e #)
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(Bus	siness Entity Nan	ne)
(Dod	cument Number)	
Certified Copies	Certificates	of Status
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FILED 05 NOV -7 PH 3: 21 SECRETARY OF STATE TALLAHASSEE FLORIDA

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NOT THE

TRANSMITTAL LETTER

Division of Corporations				
SUBJECT: Federal Equipment Company (Name of corporation)				
(Name of Corporation)				
DOCUMENT NUMBER: F02000001980				
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:				
Jessica Lappin				
(Name of person)				
Bay State Corporate Services, Inc. (Name of firm/company)				
(rame or minerally)				
6 Beacon Street, Suite 510				
(Address)	-			
Boston, MA 02108	·			
(City/state and zip code)				
For further information concerning this matter, please call:				
Jessica Lappin at (_61	7) 742-8484 rea code & daytime telephone number)			
(Name of person) (Ar	rea code & daytime telephone number)			
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing A. Rémont	Stuant Addungs.			
Mailing Address: Amendment Section	Street Address: Amendment Section			
Division of Corporations I P.O. Box 6327	Division of Corporations 109 E. Gaines Street			
Tallahassee, FL 32314	Tallahassee, FL 32399			

TO:

Amendment Section

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

Pursuant to the	provisions of sections 607.0	1502, 617.0502, 607.1508, or 617.1508, Florida Statutes, t	his statement of
change is submi	tted for a corporation organ	nized under the laws of the State of Ohio	in order
to change its reg	sistered office or registered	agent, or both, in the State of Florida.	
1. The name of t	he corporation: Federal E	quipment Company	
2. The principal	office address: 707 Carr S	treet, Cincinnati, OH 45203	
•			
3. The mailing a	ddress (if different):		
4. Date of incorp	ooration/qualification: 4/19/	2002 Document number: F02000001980	
	street address of the curren tment of State:	t registered agent and registered office on file with the	95 N
	C T Corporation System	H P	
	1200 South Pine Island I	ග් Road	12 - m
		-	光····································
	Plantation, FL 33324		PAT 2
6. The name and (if changed):	street address of the new re	egistered agent (if changed) and /or registered office	Pari —
	NRAI Services, Inc.		
	2731 Executive Park D	Orive, Suite 4	
	(P.O.	Box or personal mailbox NOT acceptable)	
	Weston, FL 33331		
The street addre	ss of its registered office a identical.	nd the street address of the business office of its register	ed agent, as
Such change wa	s authorized by resolution e corporation has been noti	duly adopted by its board of directors or by an officer so fied in writing of the change.	o authorized by
Jef la	ignature of an officer or director)	Douglas A. Ridenour, President (Printed or typed name and titl	
duties, and I am being filed mere	familiar with and accept t ly to reflect a change in th writing of this change.	red agent and agree to act in this capacity. Ins of all statutes relative to the proper and complete per the obligation of my position as registered agent. Or, if e registered office address, I hereby confirm that the co	formance of my this document is poration has
by:	Vignature of Registered Agent)	(Date)	
If signing on he	half of an entity:		
Jessica Lappin		Assistant Secretary	
	(Typed or Printed Name)	(Capacity)	

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