FO200000385I

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL
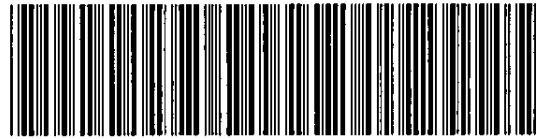
(Business Entity Name)

(Document Number)

Certified Copies _____   Certificates of Status _____

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11 OCT 14 PM 4: 11
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS
11 OCT 14 PM 4: 54

R.A. Chg.

C.COULLIETTE

OCT 17 2011

EXAMINER

CSC.

CORPORATION SERVICE COMPANY®

ACCOUNT NO.   :   I20000000195

REFERENCE   :   946427   7282677

AUTHORIZATION

COST LIMIT   : $ 35.00

ORDER DATE :   October 14, 2011

ORDER TIME :   2:52 PM

ORDER NO.   :   946427-005

CUSTOMER NO: 7282677

CHANGE OF AGENT

NAME: WINSLOW MARINE PRODUCTS
           CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____   CERTIFIED COPY
XX_____   PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Winslow Marine Products Corporation
(Name of Corporation)

DOCUMENT NUMBER: F02000003851

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:

Kim R. Dellinger
(Name of Contact Person)

Goodrich Corporation
(Firm/Company)

2730 W. Tyvola Rd., 4 Coliseum Centre
(Address)

Charlotte, NC 29218
(City/State and Zip Code)

For further information concerning this matter, please call:

Kim Dellinger _____ at (704) 423-5528
(Name of Contact Person) (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

CR2E045 (8/05)

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

1. The name of the corporation: Winslow Marine Products Corporation

2. The principal office address: 11700 SW Winslow Dr.
Lake Suzy Fl 34269

3. The mailing address (if different): Goodrich Corporation c/o Kim Dellinger
2730 W. Tyvola Rd., 4 Coliseum Centre, Charlotte, NC 28217

4. Date of incorporation/qualification: 5/27/2003   Document number: F02000003851

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

Capitol Corporate Services, Inc.

155 Office Plaza Dr., Ste. A

Tallahassee FL 32301

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.

_____   Vincent M. Lichtenberger
(Signature of an officer or 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.

Corporation Service Company

By: Stephanie Milnes Asst.V.P.   10/14/11
(Signature of Registered Agent)   (Date)

If signing on behalf of an entity:

_____
(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 (8/05)