

F07000002208

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

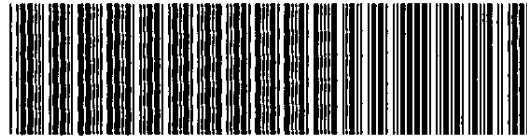
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A. Charge
C.COULLETTE

JUN 01 2010

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Schneider Engineering Corp.
(Name of Corporation)

DOCUMENT NUMBER: F07000002208

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:

Angela Gawlinski
(Name of Contact Person)

NRAI Corporate Services, Inc.
(Firm/Company)

200 West Adams, Suite 2007
(Address)

Chicago, IL 60606
(City/State and Zip Code)

For further information concerning this matter, please call:

Angela Gawlinski at (312) 346-3606
(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



**NRAI
CORPORATE
SERVICES**

Formerly Premier Corporate Services, Inc.

May 24, 2010

VIA REGULAR MAIL

Division of Corporations
Florida Department of State
P.O. Box 6327
Tallahassee, FL 32314

RE: SCHNEIDER ENGINEERING CORP.

Dear Sir or Madam:

Enclosed please find one original and one photocopy of the form to change the registered agent/office for the above captioned in your state along with our check to cover the required filing fees.

Please file with your office and return evidence to my attention at the letterhead address. If you have any questions, please contact me on our toll-free line at 800-934-2556, prior to returning the documents.

Thank you.

Sincerely,

Angela Gawlinski
Encl.

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

- 1. The name of the corporation: Schneider Engineering Corp.
- 2. The principal office address: 8901 Otis Avenue, Indianapolis, IN 46216
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: Indiana Document number: F07000002208

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):

NRAI Services, Inc.
2731 Executive Park Drive, Suite 4
(P.O. Box NOT acceptable)
Weston, FL 33331

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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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.

Victoria Schneider Temple
(Signature of an officer or director)

Victoria Schneider Temple - CEO
(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.

[Signature]
(Signature of Registered Agent)

5/24/10
(Date)

If signing on behalf of an entity:
Angela Gawlinski-Asst. Secretary
(Typed or Printed Name)

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