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Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CONTROL TECHNIQUES - AMERICAS LLC

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COVER LETTER

	stration Ser ion of Cor				
SUBJECT:	Control Tec	chniques - Americas LLC Name of Foreign	Limited Liabili	ty Compar	ny
				, ,	•
Dear Sir or N	ladam:				
The enclosed	applicatio	n, certificate and fee(s) ar	e submitted for	filing.	
Please return	all corresp	condence concerning this	matter to the fo	llowing:	
Shan	non D	iamond Name of Person Firm/Company			
<u>CT</u> (lorpo	ra-10n, Firm/Company			
120 South Cer	itral Ave., S	uite 400			
		Address			
Clayton, MO	63105				
		City/State and Zip Code			
E-mail add	iress: (to b	e used for fittire annual r	eport notification	on)	
For further in	nformation	concerning this matter, p	lease call:		
Kım Olmstead	l	1	nt (314)	553-2438	
	Name o	f Person		& Daytime	Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, Florida 32314			
Enclosed is a \$25 Filing CR2E055 (12/1)	, Fee	r the following amount: □ \$30 Filing Fee & Certificate of Status	S55 Filing Certified C		☐ \$60 Filing Fee, Certificate of Status & Certified Copy
CAZEOJJ (12/1.	-,				

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

1.	Name of limited liability Company as it appears on the records of the Florida Departm State: Control Techniques - Americas LLC	75.00
	19171	
2.	Jurisdiction of its organization; Delaware	COME OF A
		SS
3.	Date authorized to do husiness in Florida: 09/15/2006	
SI	ECTION II (4-7 complete only the applicable changes)	01. /IS
4.	New name of the limited liability company:	
Er	merson Industrial Automation USA LLC	
or	e alternate name. The alternate name must contain "Limited Liability Company," "L.L. "LI.C.") If the amendment changes the jurisdiction of organization, indicate new jurisdiction:	C."
6.	If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e) that change:), indicate
7.	Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of rejurisdiction under the law of which this entity is organized. Signature of the authorized representative John G. Shively, Secretary	
	Typed or printed name of signee	

Filing Fee: \$25.00

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "CONTROL TECHNIQUES -AMERICAS LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "EMERSON INDUSTRIAL AUTOMATION USA LLC", THE TWENTY-NINTH DAY OF DECEMBER, A.D. 2014, AT 1:37 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF AMENDMENT IS THE FIRST DAY OF JANUARY, A.D. 2015.

2261960

150007216

AUTHENTACATION: 2008289

DATE: 01-05-15