2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED DOCUMENT # **P31046** Mar 06, 2000 8:00 am **Secretary of State** FELLOWES MANUFACTURING COMPANY 03-06-2000 90106 029 ***150.00 Principal Place of Business Mailing Address 1789 NORWOOD AVE 1789 NORWOOD AVE ITASCA IL 60143-1059 ITASCA IL 60143 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 36-0770670 Not Applicable \$8.75 Additional Żip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida DYNE SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Addition ☐ Delete TITLE TITLE FELLOWES, JOHN E. NAME NAME 1789 NORWOOD AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ITASCA IL CD ☐ Addition Change ☐ Delete TITLE NAME FELLOWES, JAMES E. NAME STREET ADDRESS 1789 NORWOOD AVE. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ITASCA IL ☐ Addition **PSD** TITLE Change TITLE ☐ Delete NAME FELLOWES, PETER NAME STREET ADDRESS 1789 NORWOOD AVE. STREET ADDRESS CITY-ST-ZIP ITASCA IL 60143 CITY-ST-ZIP Change ☐ Addition TITLE □ Delete TITLE SMITH, JOHN NAME NAME STREET ADDRESS 1789 NORWOOD AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ITASCA IL ☐ Change ☐ Addition ☐ Delete TITLE TITLE COMPAGNO, ROBERT L NAME NAME STREET ADDRESS 1789 NORWOOD AVE. STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ITASCA IL ☐ Addition V٢ ☐ Change TITLE TITLE ☐ Delete KOCH, JOSEPH T. NAME NAME 1789 NORWOOD AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ITASCA IL 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

Joseph Koch 3/1/00

(630) 893-1600

Daytime Phone #