309642

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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CT
a Wolters Kluwer business

CT
1203 Governors Square Blvd.
Tallahassee, FL 32301-2960

850 222 1092 tel
850 222 7615 fax
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April 17, 2006

Department of State, Florida
Clifton Building
2611 Executive Center Circle
Tallahassee FL 32301

Re: Order #: 6612561 SO
Customer Reference 1: None Given
Customer Reference 2: Alpine Change of Agent

Dear Department of State, Florida:

Please file the attached:

Alpine Engineered Products, Inc. (FL)
Change of Agent
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to the attention of the undersigned.

If for any reason the enclosed cannot be filed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Jennifer Murphy
Fulfillment Specialist
Jennifer.Murphy@wolterskluwer.com

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

1. The name of the corporation: ALPINE ENGINEERED PRODUCTS, INC.

2. The principal office address: 1200 PARK CENTRAL BLVD. SO., POMPANO BEACH, FL 33064

3. The mailing address (if different): 3600 West Lake Avenue
Glenview, IL 60026

4. Date of incorporation/qualification: 10/06/1966 Document number: 309642

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

WATSON, THOMAS J

1200 PARK CENTRAL BLVD. SO.

POMPANO BEACH FL 33064

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6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road
(P.O. Box NOT acceptable)

Plantation, Florida 33324

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.

By: Barbara A. Siegan (Signature of an officer or director) Barbara G. Siegan, Assistant Secretary (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.

James M. Halpin (Signature of Registered Agent) Assistant Secretary 3/29/06 (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)