2001 Page 1 of 1

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

Fax Number : (050)617-6380

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZART

Account Number : 076077001702 Phone : (407)841-1200 Fax Number : (407) 423-1831

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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REGISTERED AGENT CHANGE MILLER BEARINGS, INC.

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Corporate Filing Menu

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10/8/2010

STATEMENT OF CHANGE OF RESISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change is submitted for a corp	.0502, 617.0502, 607.1508, or 617.1508, Florida Sta poration organized under the laws of the State of $\frac{Fl}{Flo}$ office or registered agent, or both, in the State of Flo	orida	; 	•
1. The name of the corporation: MILLER	R BEARINGS, INC.		·····	
2. The principal office address: 17 S. WI	ESTMORELAND DR., ORLANDO, FL 32	805		
3. The mailing address (if different): 17 S	S. WESTMORELAND DR., ORLANDO, FL	32805	j	
4. Date of incorporation/qualification:	11/17/1956 Document number:	197739	9	
5. The name and street address of the curre Florida Department of State: (If resigned	ent registered agent and registered office on file with d, enter resigned)	the		
EDNA R. ETHERID	GE			
803 N. LAKE ADAIR	R BLVD.			
ORLANDO, FL 328	04		Ť	
6. The name and street address of the new (if changed):	registered agent (if changed) and /or registered office	e \$300	0CT -8	in the second
TIMOTHY J. O'TOO	DLE			1 741
201 EAST PINE ST	REET, SUITE 801 P.O. Box NOT acceptable	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3	
ORLANDO, FL 328	·	1943 F	<u>್ಷ</u>	
The street address of its registered office as changed will be identical.	and the street address of the business office of its	registered	i agen	t,
	on duly adopted by its board of directors or by an or on has been notified in writing of the change. William Die Hulber WILLIAM BIEBERBACH, F	fficer so		
I hereby accept the appointment as regis I further agree to comply with the provis of my duties, and I am familiar with and document is being filed merely to reflect corporation has been notified in writing	tered agent and agree to act in this capacity, ions of all statutes relative to the proper and comp accept the obligation of my position as registered a change in the registered office address, I hereby			
NO POR	SEPTEMBER 29	, 2	2010	-
Signature of Registered Agent If signing on behalf of an entity:	Date			
TIMOTHY J. O'TOOLE 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)