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DOCU	JMENT # 853243	ERNST 3. CHICAG	& YOUNG LL 4-6565596 O, IL 60606-63	.P	FILED			
ARCO Comfort Products Co.					02 MAY 22 AM 9: 24			
Principal Place of Business Mailing Address			,		SECRETARY OF STATE TALLAHASSEE, FLORIDA			
2. Principal	Place of Business	3. Mailing Address			8000056941 -06/06/0201 ***2100.00	.0070)27	
	E. Randolph Drive	Suite, Apt. #, etc.		-	DO NOT WRITE-IN THIS SPACE			
City & State Unicago IL		City & State Chicago IL		4.	95-3480619	_ 	oplied For ot Applicable	
ار عا 0عا	Country	ا O ما O ما	Country	5.	Certificate of Status Desired	\$8.75 Add		7
	6. Name and Address of Current R	egistered Agent		7.	Name and Address of New Registered A	gent	·	1
OT Page System				Name				
. 10	T Corp System 00 S. Pine Island Ro	a d	Street Addres	s (P.O. E	Box Number is Not Acceptable)			}
Plantation FL 33324								
۲۱	TRUCC 17 NOTATHA.		City		FL	Zip Code	e	1
8. The above	e named entity submits this statement for	the purpose of changing its i	registered office or regis	tered as	gent, or both, in the State of Florida.			1
SIGNATURE	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE	: Registered Agent signature requ	ired when I	reinstating) DATE			
9. This corp	oration is eligible to satisfy its Intangible	FILE NOW!!	! FEE IS \$150.00		48 Floating Compaign Financian			-
_	requirement and elects to do so. aria on back)		2 Fee will be \$550.0 le to Department of S		10. Election Campaign Financing Trust Fund Contribution.		0 May Be I to Fees	
11.	OFFICERS AND D	IRECTORS	12.	Α[L DDITIONS/CHANGES TO OFFICERS AND	DIRECTORS	3 IN 11	_ [
TITLE NAME	PD D.B. Pinkert	☐ Delete	TITLE NAME			☐ Change	☐ Addition	1,00
STREET ADDRESS CITY-ST-ZIP	200 EAST RANDOLPH DRIVE	STREET ADDRESS	Change Addition Change Addition					
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NAME STREET ADDRESS	DA BOWLING	01110100 minior	NAME STREET ADDRESS				ļ	
CITY-ST-ZIP	200 EAST RANDOLPH DRIVE,	CHICAGO, ILLINOIS	COSO TO STATE					
of the cor	l on this report or supplemental report is tr	ue and accurate and that my ered to execute this report a	v signature shall have th	e same i	119.07(3)(I), Florida Statutes. I further certif legal effect as if made under oath; that I am ida Statutes; and that my name appears in I	n an officer d	or director - 3	

SIGNATURE:

Tames L. Siddall Assistant Secretary 4(22(D) 312.856.4476

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dayline Phone #