857242

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PICK-UP WAIT MAIL
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APPROVED AND FILED

R.A. Charge

6. Coullistic DEC 1 2 2007



ON SERVICE COMPANY.			
ACCOUNT NO	. : 072100000032		
REFERENC	E : 353316 7610276		
AUTHORIZATIO	Joseph Renan		
COST LIMI	r : 0\$ 25.00		
ORDER DATE : December 10, 2	007		
ORDER TIME : 9:46 AM			
ORDER NO. : 353316-080			
CUSTOMER NO: 7610276			
CHANGE OF AGENT			
NAME: NILFISK-ADV	ANCE INC		
Mental . Mantal con em va	arca, inc.		
PLEASE RETURN THE FOLLOWING	AS PROOF OF FILING:		
CERTIFIED COPY PLAIN STAMPED COPY			
CONTACT PERSON: Debbie Skipp	per		
. 1	EXAMINER'S INITIALS:		

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

statement of chang	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, nge is submitted for a corporation organized under the laws of the State of $\frac{MN}{N}$ to change its registered office or registered agent, or both, in the State of Florida.	this
1. The name of the	he corporation: NILFISK-ADVANCE, INC.	.,
2. The principal of	office address: 14600-21ST AVE., N. PLYMOUTH MN 55447	
3. The mailing add	ddress (if different):	
4. Date of incorpo	poration/qualification: 07/28/1983 Document number: 857242	
5. The name and s Florida Departm	street address of the current registered agent and registered office on file with the tment of State:	
(CT Corporation System	
1	1200 S. Pine Island Road	
]	Plantation, FL 55447-3408	
6. The name and so (if changed):	street address of the new registered agent (if changed) and /or registered office	SECRETARY SECRETARY
_(Corporation Service Company	SEE AT
. 1	1201 Hays Street	or st
	(P.O. Box NOT acceptable)	HATE O
	Tallahassee, FL 32301	7.30
_	ss of its registered office and the street address of the business office of its registe be identical.	
Such change was authorized by the	is authorized by resolution duly adopted by its board of directors or by an officer board, or the corporation has been notified in writing of the change.	so
Marin	Maureen Cullen, Attorney in Fa	act
I hereby accept th I further agree to of my duties, and document is being corporation has b	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete pe d I am familiar with and accept the obligation of my position as registered agent. ng filed merely to reflect a change in the registered office address, I hereby confir been notified in writing of this change.	erformance Or, if this m that the
By: Kull	ion Service Company 12/11/07.	
(Signa	Multiple (Date)	
If signing on beha	half of an entity:	
	, Asst. Secretary	
(Тур	yped 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)