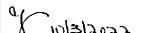


	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	(Business Entity Name)	
	(220,	
	(Document Number)	
	(Document Number)	
	0.45	
Certified Copies	Certificates of S	tatus
- 11111		
Special Instructions to	o Filing Officer:	

Office Use Only





CORPORATION SERVICE COMPANY
1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195				
REFERENCE : 967718 7731108				
AUTHORIZATION: Cypuble en a				
COST LIMIT : \$ 35.00				
ORDER DATE : September 22, 2022				
ORDER TIME : 8:24 AM				
ORDER NO. : 967718-155				
CUSTOMER NO: 7731108				
CHANGE OF AGENT				
NAME: EMERSON AUTOMATION SOLUTIONS FINAL CONTROL US LP				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY				
CONTACT PERSON: Alexxis Weiland				
EXAMINER'S INITIALS:				

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

IEMERSON AL	JTOMATION SOLUTIONS	FINAL CONTROL	US LP		
-	Name of Limited Partnership	p or Limited Liability	Limited Partne	rship	
2. 07/11/2001		3. B01000000248			
Date of fi	Date of filing/registration in Florida Florida de		Florida docu	ument number	
4. The name of the Department of State	e registered agent and the reg	gistered office address	as shown on th	ie records of th	e Florid
	C T CORPORATION	SYSTEM			
		Name		_	
	1200 SOUTH PINE IS	LAND ROAD			
		Address			2012
	PLANTATION, FL 333	324		;	72
	Cit	y, State and Zip		_	- ':'; ယ
5. The name and F	florida street address of the n	ew registered agent ar	nd/or office:		1022 SEP 30 PET 12: 2
	Corporation Service C	ompany			-::: ===
		Name		<u>t</u> -	15
	1201 Hays Street				ق
	Florida street add	ress (P.O. Box not acc	eptable)		
	Tallahassee	F	32301		
	Cit	y, State and Zip	- <u>-</u>	_	
6. Such change(s)	is/are effective when filed by				' 0 C
The E		AL AUTHORIZED PI ING, LLC, ITS GENE			'&C
Signature of Gener	al Partner				
I nereby accept the	appointment as registered a	gent and agree to act	in this canacity	: I further asr	ve to
comply with the pri	ovisions of all statutes relative the obligation.	e to the proper and co	omplete perforn	nance of my du	tties,
Signature of Regist	Tokuble ered Agent	GRACE E. KIRB	BY, ASST. VIC	E PRESIDEN	Т
J	· · · · · · · · · · · · · · · · · · ·				
mu c	675.00				

Filing Fee: \$35.00 Certified Copy (optional): \$52.50