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(((H11000190508 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I2000000195 Phone : (850)521-1000 Fax Number : (850)558-1515

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

Email Address:_

REGISTERED AGENT CHANGE INSTRUMENT MANUFACTURING COMPANY

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Help

The date of each amendment(s) a	adoption: 6-30-11				
•	(date of adoption is required)				
Effective date if applicable: (no more than 90 days after amendment file date)					
Adoption of Amendment(s)	(CHECK ONE)				
The amendment(s) was/were ac was/were sufficient for approva	dopted by the members and the number of votes cast for the amendment(s) l.				
There are no members or mem adopted by the board of directo	bers entitled to vote on the amendment(s). The amendment(s) was/were ors.				
Dated Signature	130, 2011 10 august Vola				
(By the have no	chairman or vice chairman of the board, president or other officer-if directors t been selected, by an incorporator – if in the hands of a receiver, trustee, or our appointed fiduciary by that fiduciary)				
	Typed or printed name of person signing)				
· 	PRESIDENT (Title of person signing)				

CR2E045 (8705)

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

statement of ch	ange is submitted for a corporation org	0502, 607.1508, or 617.1508. Florida State of Decarized under the laws of the State of Decarized under the laws of Decarized	laware	
		istered agent, or both, in the State of Flor	rida.	
I. The name of	the corporation: INSTRUMENT M.	ANOTACTORING COMPAINT		
2. The principa	d office address: 50 Utopia Road, Ma	inchester, C1 06042		
3. The mailing	address (if different):			
4. Date of inco	rporation/qualification: 03/14/2002	Document number: F0200000	1408	
	nd street address of the cament registered artiment of State:	d agent and registered office on file with	the	
	Registered Agents Legal Service	s. Inc.		
	155 Office Plaza Dr. Suite A		A S	
	Tallahassee, FL 32301		CAP.	
6. The name or (if changed):		gent (if changed) and for registered office	[in一人]	4
	Corporation Service Company	and the same of th	PH	1
	1201 Hays Street			i.
	(P.O. Box NOT accepts	bie)	6	
	Tallahassee, FL 32301			
The street add	ress of its registered office and the strell be identical.	eet address of the business office of us r	registered agent,	
Such change wanthorized by	as authorized by resolution duly adop the board, or the corporation has been	sted by its hourd of directors or by an of notified in writing of the change.	flicer so	
		Bruce Broussard, President		
(Signa	nue of an oleices of director)	Cirminal back to be the party of the control of the		
I hereby accept I further agree of my duties, a document is be corporation ha	of the appointment as registered agent to comply with the provisions of all st and I am familiar with and accept the a sing fited merely to reflect a change in as been notified in writing of this chan	and agree to act in this capacity. Intules relative to the proper and compl bligation of my position as registered a the registered office address, I hereby ge.	leté performance agent. Or, if this confirm that the	
By: S	ion Service Company	7-24-740		
113.	fignature of Registered Agent)	7-2-la-2-1(
ff signing on b	chalf of an entity:			
*	pet, Assistant Vice President			
	(Typed or Frinted 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