Division of Corporations Public Access System

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GUARDIAN FORT LAUDERDALE CORP.

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Corporate Filing Menu

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https://efile.sunbiz.org/scripts/efilcovr.exe

10/15/2009

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

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida lange is submitted for a corporation organized under the laws of the State of	Delaware	his 	-	
	ler to change its registered office or registered agent, or both, in the State of the corporation: Guardian Port Lauderdale Corp.				
2. The principa	l office address: 2300 HARMON ROAD, AUBURN HILLS, MI 48326				
3. The mailing	address (if different):				
4. Date of incor	poration/qualification: 02/26/2003 Document number:	F030000	00971		
5. The name an	d street address of the current registered agent and registered office on file wirtment of State: (If resigned, enter resigned)				
	Inexpositing Sewices, Utd.	-			
	Isua Blenway Dr	- :	z	2	
	Talkibassee, FL 30701	_ <u> </u>	N CO	2009 OCT	**
6. The name and (if changed):	d street address of the new registered agent (if changed) and for registered of	lice :	SLORE TARY OF STATE		ŗ
	C T Corporation System	- -	SEE.	S)	i
	c/u C T Corporation System, 1200 South Pine Island Road P.O. Box NOT acceptable	_	FLO	AH 9:	1
	P.O. Box NOT acceptable Plantation, Florida 33324		RD/	56	
The street addre	ess of its registered office and the street address of the business office of it be identical.	- is registers	ed agent	1	
	as authorized by resolution duly adopted by its board of directors or by an ne board, or the corporation has been notified in writing of the change.				
	Liela Mota. Printed or typed have and to			stary	
	the appaintment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and cond I am familiar with and accept the obliquion of my position as registereng filed merely to reflect a change in the registered office address, I hereto been notified in writing of this change.				
	Corporation System Out Made Date Date Date	·			
f signing on bel	Kelly Snedden Asst. Secretary				
Ty	yped or Printed Name ** * FILING FEE: \$35,00 * * *				
M	Make Checks payable to Florida Department of State all to; Division of Corporations, P.O. Box 6327, Tallahassee, Fl.	32314			

CR2E045 (8/05)

FLDM6 - 17723/2009 C T System Outline

POWER OF ATTORNEY

NOTICE IS HEREBY GIVEN THAT Guardian Industries Corp. ("Corporation") a Corporation incorporated under the laws of the state of Delaware and the direct or indirect owner of the subsidiary entities shown on Schedule A attached hereto, does hereby appoint Kristine Heiberger, employee of CT Corporation and acting solely in the capacity as employees of CT Corporation, as attorney-in-fact for the Corporation to act for the Corporation and in the Corporation's name for the limited purposes authorized herein.

The Corporation and the subsidiary entities listed, having taken all necessary steps to authorize the changes, hereby grants its attorney-in-fact the power to execute the documents necessary to change the Corporation's and the subsidiary entities' registered agent and registered office, or the agent and office of similar import, in any state to CT Corporation, as directed and authorized by the Corporation. The attorney-in-fact will not make such changes without the prior approval of the Corporation.

In the execution of any documents necessary for the sole, limited purpose, set forth herein, Kristine Heiberger and Liela Morad shall exercise the power of Vice President, Secretary and/or Manager.

This Power of Attorney expires when revoked by the undersigned

IN WITNESS WHEREOF the undersigned has executed this Power of Attorney on this day of September, 2009.

A Delaware Corporation

By: P P P

Name: David B, James

Title: General Cornel and Surely

State of Michigan

County of Dark land

Guardian Industries Corp.

On School Decombefore me, the undersigned, a Notary Public in and for said State, personally appeared Decombefore me, the undersigned, a Notary Public in and for said State, personally appeared Decombefore me, the undersigned, a Notary Public in and for said State, personally appeared Decombefore me, the undersigned, whose name(s) is/are subscribed to the within instrument and acknowledged to me he/she/they executed the same in his/her/their authorized capacity (ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed this instrument.

Witness my hand and, official seal.

Kerline Konsaish Notary Public Ciklari City

KELLY E. KÖVALSKI NOTARY PUBLIC, STATE OF MICHIGAN WAYNE COUNTY MY COMMISSION ESTIRES ANNARY 1, 2011