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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCAB00000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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

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STONEY CORPORATIONS
ULANIASSEE FI ONIDA

## REGISTERED AGENT CHANGE BALDWIN FILTERS, INC.

Certificate of Status	0
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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0302, 6 ngc is submitted for a corporation r to change its registered office or	organized under the laws of the	eState of DE
1. The name of t	he corporation: BaldwinFiltersInc.		<del></del>
2. The principal	office address: 30, Koarney, NE 68848		
	ddress (if different):nt Centre Drive, Suite 600, Franklin,		
4. Date of incorp	poration/qualification: 09/23/2003	Document number:	F03000004740
5. The name and	street address of the current regis tment of State:(If resigned, enter t	tered agent and registered office	
	CORPORATIONSERVICECOMP	PANY	
	1201HAYSSTREET		
	TALLAHASSEE,FL32301		·
6. The name and (if changed):	street address of the new registere	ed agent (if changed) and /or reg	istered office
	CTCorporationSystem	·····	SECRET ALLEAND
	1200SouthPineIslandRoad	•	
P.O. Box NOT acceptable			
	Plantation,Florida33324		
The street addre	ss of its registered office and the be identical.	street address of the business o	flice of its registered ent,
Such change wa authorized by the	is authorized by resolution duly ac the board, or the corporation has be	dopted by its board of directors een notified in writing of the ch	or by an officer so ange.
	1/2 -	JenniferKurz,Seerctary	
•	re of an utilicer or director	Printed or typed	· · · · · · · · · · · · · · · · · · ·
nertormance of	The appointment as registered ay to comply with the provisions of a my duties, and I am familiar with s document is being filed merely that the corporation has been not	ana accept the optivation of m	v nosition as registerea
By: ( CT Corp	poration System	03/16/2017	
	nature of Registered Agent	Date	
If signing on be	half of an entity:		
MicheleHolden,	AssiSect		
T	rped 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, FL32314
CR2E045 (03/12)