Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I2000000195 Phone : (850)521-0821

Fax Number : (850)558-1515

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

Email Address:

REGISTERED AGENT CHANGE BADER CO. OF INDIANA

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Corporate Filing Menu

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04/26/12

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40.0

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

Pursuant to the provisions of sections 607.0502, 617.0502, statement of change is submitted for a corporation organiz in order to change its registered office or register	zed under the laws of the State of $\overline{\ln}$	diana	_
1. The name of the corporation: BADER CO. OF INDI	ANA		
2. The principal office address: 9777 N. College Avenu	e, Indianapolis, IN 46280		
	WHEN A		
3. The mailing address (if different):			
4. Date of incorporation/qualification: 06/29/2004	Document number: F0400000)3682	·
5. The name and street address of the current registered age Florida Department of State:	ent and registered office on file with	the	
C T Corporation System			
1200 South Pine Island Road		ميدر بالاز	
Plantation, FL 33324 US		₹	i projektoja
6. The name and street address of the new registered agent (if changed):	(if changed) and /or registered offic	PR 25	On start
Corporation Service Company		2	1 8 1
1201 Hays Street		¥ 36	
(P.O. Box NOT acceptable)		militie O	
Tallahassee, FL 32301			
The street address of its registered office and the street a as changed will be identical.	ddress of the business office of its	registered agei	nt,
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been not	by its board of directors or by an of ified in writing of the change.	officer so	
Warren Cathold	Maureen Cathell, Vice Preside	ent	
(Signature of an officer or director)			-
I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all statu of my duties, and I am familiar with and accept the oblig document is being filed merely to reflect a change in the corporation has been notified in writing of this change. Corporation Service Company	l agree to act in this capacity. tes relative to the proper and comp zation of my position as registered registered office address, I hereby	plete performan agent. Or, if t confirm that t	ıce his he
By: (Shgnature of Registered Agent)	04/13/2012		_
(Symature of Registered Agent)	(Date)		-
If signing on behalf of an entity:			
Sylvia Queppet, Asst. VP			
(Typed or Printed Name)	17. 6 36.00 + + +		

* * * FILING FEE: \$35.00 * * *