

**Florida Department of State**  
**Division of Corporations**  
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To:

Division of Corporations  
 Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM  
 Account Number : FCA000000023  
 Phone : (850) 205-8842  
 Fax Number : (850) 878-5368

APR 07 2015

R. WHITE

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

Email Address: \_\_\_\_\_

**REGISTERED AGENT CHANGE**  
**HAAS GROUP INTERNATIONAL INC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

RECEIVED

15 APR -6 PM 3:49

DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS  
 TALLAHASSEE, FLORIDA

15 APR -6 AM 9:16

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** HAAS GROUP INTERNATIONAL INC.

\_\_\_\_\_  
Name of Corporation

**DOCUMENT NUMBER:** F05000005590

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LISA A. FONTANA

\_\_\_\_\_  
Name of Contact Person

WESCO AIRCRAFT HARDWARE CORP.

\_\_\_\_\_  
Firm/Company

24911 AVENUE STANFORD

\_\_\_\_\_  
Address

VALENCIA, CA 91355

\_\_\_\_\_  
City/State and Zip Code

LISA.FONTANA@WESCOAIR.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LISA A. FONTANA

\_\_\_\_\_  
Name of Contact Person

at ( 661 ) 776-7272  
\_\_\_\_\_  
Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

CR2ED45 (03/12)

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of PA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: HAAS GROUP INTERNATIONAL INC.
2. The principal office address: 24911 Avenue Stanford, Valencia, CA 91355
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 09/20/2005 Document number: F05000005590
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)  
NRAI SERVICES INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
C T Corporation System  
c/o C T Corporation System, 1200 South Pine Island Road  
P.O. Box NOT acceptable  
Plantation, Florida 33324

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

John Holland  
 Signature of an officer or director

JOHN HOLLAND, VP & SECRETARY

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

By: C T Corporation System  
 Signature of Registered Agent

4/6/15  
 Date

If signing on behalf of an entity:

Tristan Knuth Assistant Secretary  
 Typed 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, FL 32314

CR2E045 (03/12)