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CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE: 411245 7910858

AUTHORIZATION _

COST LIMIT

ORDER DATE: November 5, 2012

ORDER TIME : 9:47 AM

ORDER NO. : 411245-015

CUSTOMER NO: 7910858

CHANGE OF AGENT

NAME: J. RANCK ELECTRIC, INCORPORATE

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS:

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

statement of ch	-	l, 607.1508, or 617.1508, Florida Statutes, this zed under the laws of the State of Michigan red agent, or both, in the State of Florida.	
1. The name of	f the corporation: J. RANCK ELECTRIC	C, INCORPORATED	
2. The principa	al office address: 1993 GOVER PARKV	VAY, MT. PLEASANT, MI 48858	
3. The mailing	g address (if different):		
4. Date of incor	orporation/qualification: 01/25/2006	Document number: F0600000553	
	nd street address of the current registered ag partment of State: (If resigned, enter resigned		
	NRAI SERVICES, INC.	. 5	2
	515 EAST PARK AVENUE	SECTION OF	5 5
	TALLAHASSEE, FL 32301	HASSE	121
6. The name an (if changed):	nd street address of the new registered agent	t (if changed) and /or registered office	PH 12:
•	Corporation Service Company		
٠.	1201 Hays Street	7	
	P.O. Box NOT a	cceptable	
	Tallahassee, FL 32301		
The street addr	lress of its registered office and the street a	ddress of the business office of its registered a	gent,
Such change wanthorized by t	was authorized by resolution duly adopted by the board, or the corporation has been noting	by its board of directors or by an officer so fied in writing of the change.	
	linth	MATTHEW WARREN - OF	2
I hereby accep I further agree performance o agent. Or, if it hereby confirm Corporati	pt the appointment as registered agent and to comply with the provisions of all statut of my duties, and I am familiar with and action this document is being filed merely to reflect that the corporation has been notified in that the Company	tes relative to the proper and complete cept the obligation of my position as registered ct a change in the registered office address. I	ď
By: Cyli	signature of Registered Agent	Date	
If signing on b	behalf of an entity:		
Elizabeth	A. Dawson AV	•	
	Typed or Printed Name	0.000.00.4.4.4	
	* * * FILING FEE	a: a33.00 " " "	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)