F06000005084

(Requestor's Name)				
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(Cit	ty/State/Zip/Phone	; #)		
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(Document Number)				
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OVER CONTRACTOR

SECRETARY OF STATE OIVISION OF CORPORATIONS

0/12/5



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Chelsey Martine cmartin0@cscinfo.com

Date: December 31, 2014

Order#: 433503-013

Re: REFRIGERATION SYSTEMS COMPANY

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Chelsey Martine c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of ch	ange is submitted for a corporation	517.0502, 607.1508, or 617.1508, Florida Statutes, in organized under the laws of the State of Ohio registered agent, or both, in the State of Florida.	his		
1. The name of	the corporation: REFRIGERATIO	N SYSTEMS COMPANY			
2. The principa	l office address: 11800 Exit 5 Pkw	y # 106 Fishers, IN 46037			
3. The mailing	address (if different):				
4. Date of incom	poration/qualification: 07/31/200	6 Document number: F06000005084			
	d street address of the current regi rtment of State: (If resigned, enter	stered agent and registered office on file with the resigned)			
	NRAI SERVICES, INC.				
	515 East Park Avenue				
	Tallahassee, FL 32301		JAN -5	ECRET	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				FARY OF SI OF CORPOR	
	Corporation Service Company		<u>∵</u>	RATIO	
	1201 Hays Street				
P.O. Box NOT acceptable					
	Tallahassee	FL 32301			
The street addr	ress of its registered office and the let let let let let let let let let le	e street address of the business office of its register	ed age	nt,	
		adopted by its board of directors or by an officer so seen notified in writing of the change.			
Dona Priebe, Vice President					
Signa	of an onicer or director	Printed or typed name and title		-	
I further agree performance o agent. Or, if the hereby confirm	to comply with the provisions of f my duties, and I am familiar wit	gent and agree to act in this capacity. all statutes relative to the proper and complete h and accept the obligation of my position as regis y to reflect a change in the registered office addres otified in writing of this change.	tered s, I		
By: Lui	august	12/31/2014		_	
D Si	gnature of Registered Agent	Date			
If signing on b	ehalf of an entity:				
Sylvia Queppe	et, Assistant Vice President				
	Typed or Printed Name	=			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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