F08000001303

(Re	equestor's Name)		
(Ad	ldress)		
. (Ad	ldress)		
(Cit	ty/State/Zip/Phone	#)	
PICK-UP	WAIT	MAIL	
(Bu	siness Entity Nam	ne)	
(Do	cument Number)		
Certified Copies	_ Certificates	of Status	
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RAJROCH8



ACCOUNT NO. : I2000000195

REFERENCE : 547733 5017980

AUTHORIZATION :

COST LIMIT : \$ 35

ORDER DATE: February 26, 2013

ORDER TIME : 3:17 PM

ORDER NO. : 547733-015

CUSTOMER NO: 5017980

CHANGE OF AGENT

NAME: BOURNS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Carina L. Dunlap

EXAMINER'S INITIALS:

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

statement of cha	nge is submitted for a corporation organ	ized under the laws of the State of California red agent, or both, in the State of Florida.	
	he corporation: BOURNS, INC.		
2. The principal	office address: 1200 Columbia Ave., Rive	erside, CA 92507	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 03/24/2008	Document number: F08000001303	
	street address of the current registered at tment of State: (If resigned, enter resigne		
•	C T Corporation System	<u> </u>	•
	1200 South Pine Island Road, Plantatio	n, FL 33324	
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office		
	1201 Hays Street		
	PO Box NOT	acceptable	
	Tallahassee, FL 32301		
		address of the business office of its registered agen by its board of directors or by an officer so ified in writing of the change.	ıt,
MA	Charles and	Maureen Cathell, Vice President	
// Signatur	e of an officer or director	Printed or typed name and title	
I further agree to performance of a gent. Or, if thi hereby confirm to	the appointment as registered agent and o comply with the provisions of all statumy duties, and I am familiar with and as s document is being filed merely to reflect that the corporation has been notified in Service Company	tes relative to the proper and complete coept the obligation of my position as registered ct a chance in the registered office address. I	
By: Open dudson		02/28/2013	
a	ature of Registered Agent	Date	
It signing on bel	nalf of an entity:		
April Hudson, A			
IŅ	ped or Printed Name * * * FILING FEI	E: \$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)