(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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06/18/17--01021--020 ++35.00

JUN 2 0 2017 S. YOUNG



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby grace.kirby@cscglobal.com

Date: June 14, 2017

Order#: 677285-002

Re: WHEATON & SPRAGUE ENGINEERING, INC.

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.

\_\_\_ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Grace Kirby 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	17,0502, 607,1508, or 617,1508, Flori a organized under the laws of the State registered agent, or both, in the State	of OH	
1. The name of	the corporation: WHEATON & SP	RAGUE ENGINEERING, INC.		
	office address: PUS DRIVE, STOW OH 44224	<u> </u>		
3. The mailing	address (if different):			
4. Date of inco	00002590			
	nd street address of the current regis artment of State: (If resigned, enter	stered agent and registered office on file resigned)	e with the	
	Registered Agent Solutions, Inc.			
	155 Office Plaza Drive, Suite A			
	Tallahassee	FL 32301		
6. The name an (if changed):	-	ed agent (if changed) and /or registered	Lottice	
	Corporation Service Company		= 5.	
	1201 Hays Street			
		Box NOT acceptable	—,	
	Tallahassee	FL 32301	<u> -</u> 린 생	
The street addr as changed wil	ress of its registered office and the I be identical.	street address of the business office of	of its registered agent.	
Such change wanthorized by t	ras authorized by resolution duly a the board, or the corporation has be	dopted by its board of directors or by een notified in writing of the change.	an officer so	
$\sim$	el E. Wome	Jill Cilmi	Vice President	
I hereby accept further agree performance of agent. Or, if the hereby confirm	to comply with the provisions of a f my duties, and I am familiar with	Printed or typed name an ent and agree to act in this capacity, all statutes relative to the proper and and accept the obligation of my posito reflect a change in the registered of the in writing of this change.  06/14/2017	complete tion as registered	
	gnature of Registered Agent	Date		
If signing on be	ehalf of an entity:			
Grace E. Kirby	v, Asst. Vice President			
	Lyped or Printed Name			

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, Ft. 32314

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