# F10000003451

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 056867 4719887

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AUTHORIZATION : Open de la commencia del la commencia de la commencia de la commencia de la commencia de la co

COST LIMIT : \$35.00

ORDER DATE: February 2, 2018

ORDER TIME : 9:39 AM

ORDER NO. : 056867-020

CUSTOMER NO: 4719887

#### FOREIGN FILINGS

NAME: GE ANALYTICAL INSTRUMENTS,

INC.

XX CORPORATE
LIMITED PARTNERSHIP
LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

### **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUBJ	GE Analytical Instruments, Inc.	
5020	Name o	of Corporation
DOC	UMENT NUMBER: F10000003451	
The e	nclosed Amendment and fee are submi	tted for filing.
Please	e return all correspondence concerning	this matter to the following:
	Name of Contact Person	<del></del>
	Firm/Company	
	Address	
	City/State and Zip Code	
<u>I</u>	E-mail address: (to be used for future annu	al report notification)
For fi	urther information concerning this matt	er, please call:
	Name of Contact Person	at () Area Code & Daytime Telephone Number
Enclo	osed is a check for the following amour	nt:
	\$35.00 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Amer Divis P.O.	ing Address: Indiment Section Ition of Corporations Box 6327 hassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

# PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

# SECTION I (1-3 MUST BE COMPLETED)

F10000003451	
<u> </u>	Occument number of corporation (if known)
1. GE Analytical Instruments, Inc.	
(Name of corporat	tion as it appears on the records of the Department of State)
2. Colorado	3. 07/30/2010 (Date authorized to do business in Florida)
(Incorporated under laws of	(Date authorized to do business in Florida)
(4-7 con	SECTION II MPLETE ONLY THE APPLICABLE CHANGES)
4. If the amendment changes the name of	the corporation, when was the change effected under the laws of
its jurisdiction of incorporation? 11/29/	2017
5. SUEZ WTS Analytical Instruments, Inc.	
appropriate abbreviation, if not conta	
business in Florida)	enter alternate corporate name adopted for the purpose of transacting of duration, indicate new period of duration.
<del></del>	(New duration)
7. If the amendment changes the jurisdict	tion of incorporation, indicate new jurisdiction.
· .	(New jurisdiction)
8. Attached is a certificate or document of 90 days prior to delivery of the application having custody of corporate records in	of similar import, evidencing the amendment, authenticated not more than ation to the Department of State, by the Secretary of State or other official the jurisdiction under the laws of which it is incorporated.
(Signature	of a director, president or other officer - if in the hands ver or other court appointed fiduciary, by that fiduciary)
Karen DeAngelo	Secretary
(Typed or printed name of person	signing) (Title of person signing)

# OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

## CERTIFICATE OF DOCUMENT FILED

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office, the attached document is a true and complete copy of the

Articles of Amendment

with Document # 20171880665 of SUEZ WTS Analytical Instruments, Inc.

Colorado Corporation

(Entity ID # 19871523564)

consisting of 2 pages.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 02/01/2018 that have been posted, and by documents delivered to this office electronically through 02/05/2018@ 07:40:40.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 02/05/2018 @ 07:40:40 in accordance with applicable law. This certificate is assigned Confirmation Number 10700338



Nagra N. Williams

Secretary of State of the State of Colorado

\*\*\*\*End of Certificate\*

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.us/biz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."



Document must be filed electronically.
Paper documents are not accepted.
Fees & forms are subject to change.
For more information or to print copies of filed documents, visit www.sos.state.co.us.

Colorado Secretary of State

Date and Time: 11/27/2017 01:11 PM

ID Number: 19871523564

Document number: 20171880665

Amount Paid: \$25.00

ABOVE SPACE FOR OFFICE USE ONLY

#### **Articles of Amendment**

filed pursuant to §7-90-301, et seq. and §7-110-106 of the Colorado Revised Statutes (C.R.S.)

1.	For the entity, its ID number and entit	y name are				
	ID number	19871523564 (Colorado Secretary of State ID)	number)			
	Entity name	GE Analytical Instrum	nents Inc.			·
2.	The new entity name (if applicable) is	SUEZ WTS Analytica	al Instruments,	Inc.		·
3.	(If the following statement applies, adopt the statement by marking the box and include an attachment.)  This document contains additional amendments or other information.					
4.	If the amendment provides for an excattachment states the provisions for in			sued shar	res, the	
5.	(Caution: Leave blank if the document does not he consequences. Read instructions before entering to		ng a delayed effecuve	date has sig	nificant lega	ſ
	(If the following statement applies, adopt the state	ement by entering a date and, if ap	oplicable, time using th	he required j	format.)	
	The delayed effective date and, if app	olicable, time of this docur	ment is/are 11/2	9/2017		
	,		(mn	ı'dd'yyyy hou	r:minute am'pi	n)
No	tice:					
ack ind per the stat	using this document to be delivered to the mowledgment of each individual causing ividual's act and deed, or that such indivision on whose behalf such individual is carequirements of part 3 of article 90 of tit tutes, and that such individual in good fainplies with the requirements of that Part,	such delivery, under penal- dual in good faith believes ausing such document to be le 7, C.R.S. and, if applicab th believes the facts stated	ties of perjury, the such document is delivered for filingle, the constituent in such document	at such do the act an ng, taken t documen are true a	cument is nd deed of in conform nts and the	the nity with organic
	is perjury notice applies to each individua ether or not such individual is identified i				-	late,
6.	The true name and mailing address of the individual causing the document to be delivered for					
	filing are	Weissman	Sarah	<u>M.</u>	a e data	4C. (C)
		(Last) Davis Polk & Wardw	(First) ell III P	(	Middle)	(Suffix)
		(Street name o	and number or Post Office	e Box informa	tion)	
		450 Lexington Avenu		40047		<del></del>
		New York	NY (State)	10017	Postal Zip Cod	(e)
		(Prayings - if apply abla)	United S		-	

(If the following statement applies, adopt the statement by marking the box and include an attachment.)
This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.
Disclaimer:
This form/cover sheet, and any related instructions, are not intended to provide legal, business or tax advice, and are furnished without representation or warranty. While this form/cover sheet is believed to satisfy minimum legal requirements as of its revision date, compliance with applicable law, as the same may be amended from time to time, remains the responsibility of the user of this form/cover sheet. Questions should be addressed to the user's legal, business or tax advisor(s).