Division of Corporations



Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number Phone Fax Number

FCA000000023 (850)205-8842 (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

REGISTERED AGENT CHANGE TESTING MACHINES, INC.

Certificate of Status	0
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Page Count	03
Estimated Charge	\$35.00

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Corporate Filing Menu

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COVER LETTER

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COVER LETTER					
TO: A	Amendment Section			- 10 W	
Division of Corporations				7. 99	
	TESTING MACHINES, INC.			1. The	
SUBJECT	T:Name of Corporation	חל			
DOCUM	F14000003082				
	IENT NUMBER:osed Statement of Change of Registered Office/Agent	and fee are submi	ited for filing		
	nurn all correspondence concerning this matter to the f		nted for triting.		
1 lease ton	will all correspondence concerning this matter to the t	onowing.			
	Rence Butz				
	Name of Contact Person				
	Testing Machines, Inc.				
	Firm/Company				
	40 McCullough Drive				
Address					
New Castle, DE 19720					
City/State and Zip Code					
	rbutz@testingmachines.com				
	E-mail address: (to be used for future an	nual report notif	ication)		
For further	er information concerning this matter, please call:				
Renee Butz	as f	1	00 x 130		
	Name of Contact Person A	ea Code & Daytu	me Telephone Number		
Enclosed i	is a \$35.00 check made payable to the Department of	Sinte,			
	Malling Address: Amendment Section	Street Address: Amendment Se			
	Amendment Section Division of Corporations	Amendment Se Division of Co			

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (03/12)

P.O. Box 6327

Tallahassee, FL 32314

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.
I. The name of the corporation: TESTING MACHINES, INC.
2. The principal office address: 40 MCCULLOUGH DRIVE NEW CASTLE, DE 19720
3. The mailing address (if different):
4. Date of incorporation/qualification: 07/21/2014 Document number: F14000003082
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
NRAI SERVICES, INC
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
C T Corporation System
c/o C T Corporation System, 1200 South Pine Island Road
P.O. Box NOT acceptable Plantation, Florida 33324
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Renee Butz/HR Manager
Significe of an officer of dreetor I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this doctiment is being fled merely to reflect a change in the registered office address, I hereby confirm that the gorporation has been notified in writing of this change.
By: CT Comparation System 7/18/2016
If signing on behalf of an entity: Leslie Martin Assistant Secretary
Typed or Printed Name * * * FILING FEE: \$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)