

**F94000003282**

**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 : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (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  
UTILITY EQUIPMENT LEASING CORPORATION**

Certificate of Status	0
Certified Copy	0
Page Count	034
Estimated Charge	\$35.00

13 JAN 22 AM 10:22  
FCA000000023

*RA Chang*

Electronic Filing Menu

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1-23-13  
DC



January 22, 2013

## FLORIDA DEPARTMENT OF STATE

Division of Corporations

UTILITY EQUIPMENT LEASING CORPORATION

P.O. BOX 177

WAUKESHA, WI 53187-0177US

SUBJECT: UTILITY EQUIPMENT LEASING CORPORATION

REF: F940000032B2

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell  
Regulatory Specialist II

FAX Aud. #: H13000016289  
Letter Number: 513A00001626

RECEIVED

13 JAN 23 AM 8:10

DIVISION OF CORPORATIONS  
FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA 32314**\*RE-SUBMIT\***

Please retain original filing  
date of submission 1/22

P.O BOX 6327 - Tallahassee, Florida 32314

## COVER LETTER

**TO:   Amendment Section**  
**Division of Corporations**

**SUBJECT:** Utility Equipment Leasing Corporation

Name of Corporation

**DOCUMENT NUMBER:** F94000003282

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

**Please return all correspondence concerning this matter to the following:**

Name of Contact Person

Firm/Company

**Address**

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

**For further information concerning this matter, please call:**

Name of Contact Person

45

Area Code &amp; Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

CH2E045 (03/12)

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 Wisconsin in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Utility Equipment Leasing Corporation
2. The principal office address: 3112 E. State Road 124, Bluffton, IN 46714
3. The mailing address (if different): c/o Platinum Equity, LLC 360 N Crescent Dr., South Bldg., Beverly Hills, CA 90210
4. Date of incorporation/qualification: 03/05/2007 Document number: F94000003282
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)

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301-2525

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.

Sally A. Ward  
Signature of an officer or director

Sally A. Ward, Assistant Secretary

Printed or typed name and title

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 document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

By: C T Corporation System  
Connie Bryan  
Signature of Registered Agent

January 18, 2013  
Date

If signing on behalf of an entity:

Connie Bryan  
Assistant Secretary

\*\*\* 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)