## F9400003640

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9/26/11



ACCOUNT NO. : I2000000195

REFERENCE : 919055

7849081

AUTHORIZATION :

COST LIMIT : \$35

ORDER DATE: September 21, 2011

ORDER TIME : 10:33 AM

ORDER NO. : 919055-006

CUSTOMER NO: 7849081

## CHANGE OF AGENT

NAME: DEI INCORPORATED

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce

EXAMINER'S INITIALS:

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

statement of cha	provisions of sections 607.0502, 617.0502 nge is submitted for a corporation organiz r to change its registered office or register	zed under the laws of the State of	Ohio
1. The name of t	he corporation: DEI Incorporated		
2. The principal	office address: 1550 Kemper Meadow	Drive, Cincinnati OH 45240	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 07/12/1994	Document number: F94000	0003640
	I street address of the current registered agreement of State:	ent and registered office on file w	vith the
	NRAI Services, Inc.		
	515 E. Park Avenue	. P	- 15 B
	Tallahassee, FL 32301		FILE SECRETARS TALLAHASS
6. The name and (if changed):	street address of the new registered agent	(if changed) and /or registered of	T 26 PA HASSEE, F
	Corporation Service Company	·····	STATE
	1201 Hays Street		5m s
	(P.O. Box NOT acceptable)		<del></del>
	Tallahassee, FL 32301		_
The street addre	ess of its registered office and the street a be identical.	ddress of the business office of	its registered agent,
Such change wa authorized by th	is authorized by resolution duly adopted the board, or the corporation has been not	by its board of directors or by a ified in writing of the change.	n officer so
Mac (Signatu	we of an officer or director)	MOUTEEN CO	athell
l further agree t of my duties, an document is bei corporation has	the appointment as registered agent and to comply with the provisions of all statu d I am familiar with and accept the oblig ng filed merely to reflect a change in the been notified in writing of this change.	lagree to act in this capacity. tes relative to the proper and co zation of my position as register registered office address, I here	omplete performance red agent. Or, if this eby confirm that the
By:	on Service Company  the House of Registered Agent)	09/23/2011 (Date)	·
If signing on be	half of an entity:		•
Grace E. Kirby	y, Assistant VP		
(1)	yped or Printed Name)		

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