## F94000004545

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ry/State/Zip/Phone	, #\
(	.,,	,
PICK-UP	☐ WAIT	MAIL
		<del>_</del>
(D.,	-la Fatte None	
(Bu	siness Entity Nam	ie)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
		j

Office Use Only



700109629867

10/01/07--01003--013 \*\*35.00

RA to chy

O7 SEP 25 PM 2: 59
SECRETARY OF STATE
AND ASSEE, FLORIDA



September 20, 2007

To Whom It May Concern:

Please file the enclosed Document and return a date stamped copy to my attention. I have enclosed a self address envelope for your convenience.

Should you have any questions, please do not hesitate to contact me. The number I can be reached at is 1-800-235-0337 x 110

Sincerely,

Jill Probst

Corporate Services Department

## COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MICRO ELECTRONICS, INC.

(Name of Corporation)

DOCUMENT NUMBER: F94000004545

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)

(Firm/Company)

(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Contact Person)

(Name of Contact Person)

(Area Code & 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

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

	f the corporation:	MICRO ELECTRONICS, INC.	MICRO ELECTRONICS, INC.	
2. The principa	al office address:			
4119 LE	AP ROAD HILLIARD OH 4302	6 US		
3. The mailing	address (if different):			
4. Date of inco		Document number: F94000004	1545	
5. The name ar		ered agent and registered office on file with the		
	C T CORPORATION SY	'STEM	\$ 0 <b>2</b>	
	1200 SOUTH PINE ISLAND	RD. PLANTATION FL 33324 US	Egg &	
			F. 1	
6. The name ar (if changed):		l agent (if changed) and /or registered office	EE, FLOT	
	NRAI Services, Inc.			
	0704 5	in a Crita A		
	2731 Executive Park Dr	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	•	
	(P.O. Box NOT acco	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	,	
	(P.O. Box NOT acce	eptable)		
The street add as changed wi	(P.O. Box NOT acce	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	tered agent,	
	Weston, FL 33331 ress of its registered office and the s	eptable)		
Such change wauthorized by	(P.O. Box NOT according to the second state of its registered office and the second state of its registered office and the second state of its registered office and the second state of its registered of its registered at the second state of its registered of its registered at the second state of its registered	eptable)  street address of the business office of its regist lopted by its board of directors or by an officer en notified in writing of the change.  T. Janly Kochler (Printed or typed name and title)	or so	
Such change wauthorized by	Weston, FL 33331  ress of its registered office and the sill be identical.  was authorized by resolution duly ad the board, or the corporation has been the appointment as registered age to comply with the provisions of all and familiar with and accept the ing filed merely to reflect a change as been notified in writing of this chemical was been notified in writing of the second was a second with the provisions of all the second was a second with the provisions of all the second was a second with the provisions of all the second was a second with the second was a second	Interest address of the business office of its registed by its board of directors or by an officer en notified in writing of the change.  T. Jang Holl of the proper and title)  Int and agree to act in this capacity.  I statutes relative to the proper and complete per position as registered agent in the registered office address, I hereby confiange.	or so	
Such change wauthorized by	(P.O. Box NOT according to the second state of its registered office and the second state of its registered office and the second state of its registered office and the second state of its registered of its registered at the second state of its registered of its registered at the second state of its registered	Interest address of the business office of its registed by its board of directors or by an officer en notified in writing of the change.  T. Jang Holl of the proper and title)  Int and agree to act in this capacity.  I statutes relative to the proper and complete per position as registered agent in the registered office address, I hereby confiange.	or so	

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