Florida Department of State

Division of Corporations Public Access System

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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

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: (850)878-5926

## REGISTERED AGENT CHANGE

TRIUMPH AEROSPACE SYSTEMS - WICHITA, INC.

Certificate of Status	0
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3/21/2008

03/21/2008 12:59

## 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 organi sto change its registered office or register	zed under the laws of the State of Kansa	2	
1. The name of t	ne corporation: Triumph Acrospace System	ns - Wichita, Inc.		
	office address: 9323 E 34th Street N, Wich			
3. The mailing a	Idress (if different): 1550 Liberty Ridge Do	rive, Suite 100, Wayne, PA 19087		
4. Date of incorp	oration/qualification: 8/1/95	Document number: F95000003700		
5. The name and Florida Depart	atreet address of the current registered agment of State:	ent and registered office on file with the		
	Corporation Service Company		7 2	
	1004 IV 64		2008 MAR SECRET	14
	Tallahassee, FL 32301-2525		R 21	Market Services
6. The name and (if changed);	street address of the new registered agent	t (if changed) and /or registered office	EEO F	7
	C T Corporation	n System	M 9:50 FSTATE FLORID	
	c/o C T Corporation System, 12	00 South Pine Island Road	D 0	
	(P.Q. Box NOT sceeptable)			
	Plantation, Plori	ida 33324		
	ss of its registered office and the street a be idenneal. s authorized by resolution duly adopted e board, or the corporation has been not			
( Police	To St an Officer of director)	VICKIANN DEVENS, VIC		_
I hereby accept I further agree to of my duties, an document is being corporation has	the appointment as registered agent and a comply with the provisions of all statu d I am familiar with and accept the obli- ng filed merely to reflect a change in the been notified in writing of this change.	i agree to act in this capacity, stes relative to the proper and complete gation of my position as registered age registered office address, I hereby co	a performance ent. Or, if this nfirm that the	
Ву:	C T Corporation System  O C C Corporation System  Mayor of Acquired Agent)	3/13/2008 (Date)		
If signing on be	half of an entity:			
Ass	stant Vice President			
רז	yped or Printed Name)  * * * FILING FE	E: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)