

Division of Corporations

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**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**  
**SAFETY SOLUTIONS ENTERPRISES, INCORPORATED**

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 DIVISION OF CORPORATIONS  
 TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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JUN 26 2015

T. LEMIEUX

### COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: SAFETY SOLUTIONS ENTERPRISES, INCORPORATED  
Name of Corporation

DOCUMENT NUMBER: F97000001166

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:

Janet L. Scholz

Name of Contact Person

W. W. Grainger, Inc.

Firm/Company

100 Grainger Parkway, B4.T56,

Address

Lake Forest, IL 60045-5201

City/State and Zip Code

jane1.scholz@grainger.com

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

For further information concerning this matter, please call:

Janet L. Scholz

Name of Contact Person

847

535-1044

at ( )

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

CR2E045 (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 Ohio in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: SAFETY SOLUTIONS ENTERPRISES, INCORPORATED
2. The principal office address: 6161 SHAMROCK CT DUBLIN, OH 43016-2100
3. The mailing address (if different): 100 Grainger Parkway B3.E40 Tax Dept Lake Forest, IL 60045-5201
4. Date of incorporation/qualification: 03/06/1997 Document number: F97000001166
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)

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/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.

Signature of an officer or director

**Paul J. Stanukinas - 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.

CT Corporation System

By: \_\_\_\_\_

Signature of Registered Agent

Connie Bryan

June 25, 2014

**Signature of Registered Agent**

Date \_\_\_\_\_

**If signing on behalf of an entity:**

**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)

14 JUN 25 AM 10:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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