[redacted] UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 24, 2001 8:00 am
Secretary of State
07-24-2001 90009 017 ***550.00

01366638 AT

DOCUMENT # F99000001312

1. Entity Name
OHM SYSTEMS, INC.

Principal Place of Business	Mailing Address
2219 RIMLAND DR. BELLINGHAM WA 98226	P.O. BOX 5348 BELLINGHAM WA 98227

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
200 E. Randolph Dr.	P.O. Box 8264
Suite, Apt. #, etc.: Tax Dept., 4th FL	Suite, Apt. #, etc.: Tax Dept, 4th Floor
City & State: Chicago, IL	City & State: Chicago, IL
Zip: 60601 Country: US	Zip: 60680 Country: US

4. FEI Number 91-1500758 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐	**FILE NOW!!! FEE IS $550.00** **After September 12, 2001 Fee will be $750.00** **Make Check Payable to Department of State**	10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GAUTHIER, C P 913 RACINE BELLINGHAM WA	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CFOD SOLBERG, DANIEL M 833 WAUGH RD MT VERNON WA	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD LERA, MARGARET 912 QUEEN STREET BELLINGHAM WA	☒ Delete	VP JEROME I. BAER 200 E. RANDOLPH DR. CHICAGO, IL 60601	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BODWAY, CRAIG A 1341 ROMA RD BELLINGHAM WA	☒ Delete	S ARLENE IESCHKE 200 E. RANDOLPH DR. CHICAGO, IL 60601	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☒ Delete	T DIANE AIGOTTI 200 E. RANDOLPH DR. CHICAGO, IL 60601	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (5/01)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED JEROME I. BAER 7/16/01 312-781-3271
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #