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(R	equestor's Name)	
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PICK-UP	☐ WAJT	MAIL
(B	usiness Entity Name)	
(L)	ocument Number)	
Certified Copies	Certificates of	Status
Octomed Sopies	Continuates of	Olalus
Special Instructions to Fil	ing Officer:	

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FILED OF

1 C - 7 From 7

A. RAMSEY

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 487575 4328094
AUTHORIZATION Consideration
COST LIMIT : \$25.0
ORDER DATE : June 5, 2024
ORDER TIME : 1:50 PM
ORDER NO. : 487575-003
CUSTOMER NO: 4328094
CHANGE OF AGENT
NAME: ALTAQUIP LLC
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
CONTACT PERSON: Shauna Godbolt
FYAMTNED'S TNITTALS

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	ame of the limited liability company: ALTAQUIP LLC	C				
			b)			
.,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			lailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	100 Production Drive		100 Prod	uction Drive		
	Harrison, OH 45030		Harrison,	OH 45030		
-	01/30/2004 —		M0400000	00418		
3.	Date of filing/registration in Florida	4.		Document number	-	
5. (a)				:1	285	
27. (41)	Registered Agent and Registered Office shown on the records o	f the Florid	la Dept. of Stat		ھے۔ بین	
	CORPORATE CREATIONS NETWORK INC.			Į.	2024 JUN -7	FILED
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>S)</u>	- ري ري		1
	801 US HIGHWAY 1				PH 12	- (
	NORTH PALM BEACH	33408		ائے :)	
	, Г	L		-	95	
(b)						
*	Enter name of NEW Registered Agen1 and/or NEW Registere	d Office a	ddress:	_		
	Corporation Service Company					
	NEW Registered Office Address:			_		
	1201 Hays Street					
				_		
	Tallahassee, F	L 32301		_		
change agent v was/w	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited like authorized by an affirmative vote of the members icles of organization or the operating agreement of the last Heidi Alten	e register iability co of the lin a limited	ed office and ompany, it is nited liability liability com	d the business office of s hereby confirmed that y company or as otherw	the registe the change	red :(s)
Signa	dure of a member or authorized representative of a member			Printed or typed name of si	gnee	
provisi the obi to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I d in writing of this change.	e perform	ance of my c	luties and Lam familia	r with and	accept
<u></u>	Drace Cokuble	GRAC	CE E. KIRB	Y, ASST. VICE PRESI	DENT	
Signatu	re of Registered Agent - \					