

M1700007676

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

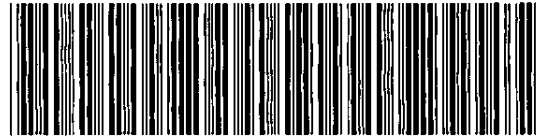
(Business Entity Name)

(Document Number)

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JUN 23 2015

J SHIVERS

RECEIVED  
15 JUN 22 AM 11:05  
15 JUN 22 AM 10:44  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS & ALLIANCE FLORIDA

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 673588 7917194  
AUTHORIZATION :   
COST LIMIT : \$ 25.00

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ORDER DATE : June 17, 2015  
ORDER TIME : 10:26 AM.  
ORDER NO. : 673588-020  
CUSTOMER NO: 7917194  
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CHANGE OF AGENT

NAME: CEC COMBUSTION SAFETY, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Courtney Williams

EXAMINER'S INITIALS: \_\_\_\_\_

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CEC Combustion Safety, LLC  
\_\_\_\_\_  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Matthew Nozemack

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

2077 Convention Center Concourse, Ste. 175

\_\_\_\_\_  
Address

College Park, GA 30337

\_\_\_\_\_  
City/State and Zip Code

matthew.nozemack@melroseplc.net

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

For further information concerning this matter, please call:

Matthew Nozemack at ( 404 ) 941-2100  
\_\_\_\_\_  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

**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. Name of the limited liability company: CEC Combustion Safety, LLC

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_  
 Principal office address of limited liability company: Mailing address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)* *(Note: MAY BE POST OFFICE BOX)*

11699 Brookpark Rd. 11699 Brookpark Rd.  
Cleveland, OH 44130 Cleveland, OH 44130

3. 06/11/2013 4. M13000003676  
 Date of filing/registration in Florida Document number

5. (a) National Registered Agents, Inc.  
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1200 S. Pine Island Rd.  
 Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

Plantation, FL 33324-2525

(b) Corporation Service Company  
 Enter name of NEW Registered Agent and/or NEW Registered Office address:

1201 Hays Street  
NEW Registered Office Address:

Tallahassee, FL 32301

FILED  
 15 JUN 22 AM 10:14  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

 Matthew Nozemack  
 Signature of a member or authorized representative of a member Printed or typed name of signee

*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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

 BY: Michele L. Abbott, Asst. VP  
 Signature of Registered Agent Corporation Service Company