Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000029315 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

: (850)205-8842

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:					

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KIDDE FIRE TRAINERS, LLC

Certificate of Status 0 0 Certified Copy Page Count 05 \$25.00 Estimated Charge

FEB 0 5 2016

Y SULKER

2016 FEB -4

Electronic Filing Menu

Corporate Filing Menu

Help

## COVER LETTER

TO: Registration Section	·			
Division of Corporations				
SUBJECT: Kidde Fire Trainers, LLC				
	ign Limited Liability Company			
Dear Sir or Madam:				
The enclosed application, certificate and fee(s	) are submitted for filing.			
Please return all correspondence concerning to	his matter to the following:			
William R. Lane				
Name of Person	<del></del>			
	·			
KFT Fire Trainer, LLC				
Firm/Company				
17 Philips Parkway				
Address				
Montvale, NI 07645  City/State and Zip Coc	le.			
Only Diano and Dip Good	•			
arlene.rosenberg@kft.firetrainer.com				
E-mail address: (to be used for future annua	l report notification)			
For further information concerning this matter	, please call:			
William R. Lane	at ( 201 ) 300-8121			
Name of Person	Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building	P.O. Box 6327			
2661 Executive Center Circle	Tallahassee, Florida 32314			
Tallahassee, Florida 32301				
Enclosed is a check for the following amount				
□ \$25 Filing Fee □ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee &. □ \$60 Filing Fee, Certified Copy Certificate of Status &			
Certificate of Status	Certified Copy  Certified Copy			
CR2E055 (12/14)				

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

## SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Dep	partment	of
State: Kidde Fire Trainers, LLC		_
2. The Florida document number of this limited liability company is: M14000003335		
3. Jurisdiction of its organization: Delaware		_
4. Date authorized to do business in Florida: 05/15/2014		_
SECTION II (5-9 complete only the applicable changes)		
5. New name of the limited liability company: KFT Fire Trainer, LLC		
(must contain "Limited Liability Company, ""L.L.C.,"	or "LLC.	") <u> </u>
	المشم	5
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limitoc Company," "L.L.C." or "LLC.")	of the write i Liability	
6. If amending the registered agent and/or registered office address on our records, enter t	د است. معان آمان	- <del></del> -
the new registered agent and/or the new registered office address here:	rue mairie	- 107
	₽::	ë
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:	Ž.>-	
. Enter Florida Street Address		•
, Florida		
	Zip Code	-
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree to act in this capacity. I fue comply with the provisions of all statutes relative to the proper and complete performance duties, and I am familiar with and accept the obligations of my position as registered age provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a chargestered office address, I hereby confirm that the limited liability company has been not writing of this change.	e of my ent as lange in	
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:		

itle/ Capacity	<u>Name</u>	Address	Type of Action
			Add
			☐ Remove
			Add
	_		□ Remove
<del></del>			Add
·	_		D Remove
<u>.</u>			- O Add
	<u></u>		□ Remove
aforementioned ar	ficate, if required: no more than some than some than some than some the law of which this entity is organized to the law of which this entity is organized to the automatical some than some than some the some than some the some than som	by the official having custo	
	•		

Filing Fee: \$25.00



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "KIDDE FIRE TRAINERS, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "KFT FIRE TRAINER, LLC" ON THE TWENTY-EIGHTH DAY OF JANUARY, A.D. 2016, AT 5:50 O'CLOCK P.M.

5459559 8320 SR# 20160569627 Authentication: 201774686 Date: 02-03-16

You may verify this certificate online at corp.delaware.gov/authver.shtml

CD