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(Re	equestor's Name)					
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(City/State/Zip/Phone #)						
PICK-UP	MAIT	MAIL				
(Business Entity Name)						
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195						
REFERENCE : 285487 7397794						
AUTHORIZATION: Spelle man						
COST LIMIT : \$ 25.00						
ORDER DATE : May 11, 2020						
ORDER TIME : 11:51 AM						
ORDER NO. : 285487-080						
CUSTOMER NO: 7397794						
CHANGE OF AGENT						
NAME: WABTEC TRANSPORTATION SYSTEMS, LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Amanda Robinson						

EXAMINER'S INITIALS:

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: WABTEC TRAI	NSPORTA	TION SYSTEM	S, LLC		
2. (a)	500 WEST MONROE STREET 24TH FLOOR	(b)	500 WEST MC	ONROE STREET 2	4TH FL	.00R
. ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(\)	Mailing	g address of limited liab te: MAY BE POST OF	•	
	CHICAGO, IL 60661		CHICAGO, IL 6	60661		
	11/21/2018	۸	1 18000010468			
3.	Date of filing/registration in Florida	4.	Docu	iment number		
5. (a)	CT CORPORATION SYSTEM					
	Registered Agent and Registered Office shown on the records of 1200 SOUTH PINE ISLAND ROAD	the Florida I	Dept. of State:			
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)				
	PLANTATION . FL	33324		SECR.	2020 OCT 19	
(h)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company NEW Registered Office Address:	l Office addi	<u>'ess</u> :	LAHASSEE FL	19 AM 9:01	. ILED
	1201 Hays Street					
	Tallahassee Fi	32301				
shange agent v was/we the arti- Signa I herei provisi the oblito mere notifice	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members of the organization or the operating agreement of the operating agreement of the organization of the operating agreement of the organization of the operating agreement of the organization of the operation of a member of a decept the appointment as registered agent and complete in the registered agent as provided by reflect a change in the registered office address. It is writing of this change.	registered ability com of the limit limited lia	office and the begany, it is hereled liability combility company.	business office of the by confirmed that the pany or as otherwise.	he regis he chan se prov	stered ige(s) ided in
10	vanda E. Klimer					

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00