## P07211

(Requestor's Name)					
(Address)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
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(Document Number)					
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SECRETARY OF STATE
ON OF CORPORATION

OF CORPORATION

C.L. 3314



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard llockar2@cscinfo.com

Date: December 16, 2014

Order#: 409700-011

Re: BARNES GROUP INC.

Enclosed please find:

<u>XX</u> Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX \_\_ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Lindsey Lockard c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation or	0502, 607.1508, or 617.1508, Florida ganized under the laws of the State of gistered agent, or both, in the State of	DE	is 	
1. The name of t	he corporation: BARNES GROUP IN	VC.			
2. The principal				-	
3. The mailing a	ddress (if different):				-
4. Date of incorp	poration/qualification: 08/26/1985	Document number: P0721	1		
	street address of the current registere tment of State: (If resigned, enter resi	ed agent and registered office on file vigned)	vith the		
	NRAI SERVICES, INC.		_		
	1200 SOUTH PINE ISLAND ROAD				프
	Plantation	FL 33324	_	4 DEC 18	SECRE
6. The name and (if changed):	street address of the new registered a	agent (if changed) and /or registered o	ffice	18 PM	DE CORPORATIONS
	Corporation Service Company		-	ယ္	SIAT SIAT
	1201 Hays Street		_	22	SNO
	P.O. Box Tallahassee	NOT acceptable FL 32301			
			-		
The street address changed will	ess of its registered office and the str be identical.	eet address of the business office of i	ts registered	d agent	l,
Such change wa authorized by th	is authorized by resolution duly adop ne board, or the corporation has been	oted by its board of directors or by an inotified in writing of the change.	officer so		
To		Dona Priebe	Vice Pre	sident	
Signatu	re ( otticer or director	Printed or typed name and t	itle		
I further agree to performance of agent. Or, if the hereby confirm	mv duties, and I am tamiliar with an	statutes relative to the proper and con nd accept the obligation of my position reflect a change in the registered offi	on as regisie	red I	
By: X	ace Cokuble	12/11/2014	<u>.                                    </u>		
Sig	nature of Registered Agent	Date			
If signing on be	half of an entity:				
Grace E. Kirby,	Assistant Vice President				
T	yped or Printed Name				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

\* \* \* FILING FEE: \$35.00 \* \* \*