PO90003460

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TALL AHARSET FLORIDA

DEC 1 8 2018 S. YOUNG RECEIVED

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 3230 Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE : 547692, 4805310
AUTHORIZATION Spelle man
COST LIMIT : \$35.00
ORDER DATE : December 17, 2018
ORDER TIME : 3:0 PM
ORDER NO. : 547692-005
CUSTOMER NO: 4805310
CHANGE OF AGENT
NAME: PULSAR PROCESS MEASUREMENT, INC.
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
CONTACT PERSON: Roxanne Turner EXT#
EXAMINER:

COVER LETTER

TO:	Amendment Section Division of Corporations			
еттр	Pulsar Process Measurement, Inc.			
SUDJ	Name of Corporation			
DOC	P09000003460 UMENT NUMBER:			
The e	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.			
	e return all correspondence concerning this matter to the following:			
		こい	<u></u>	
	Name of Contact Person		30 8	-
	Firm/Company	T.t.	C 17	
	Address	EL PLORIDA	17 AM 9:39	•
		AUS AUS	39	
	City/State and Zip Code			
	E-mail address: (to be used for future annual report notification)			
For fi	urther information concerning this matter, please call:			
	Name of Contact Person	Number		
Enclo	osed is a \$35.00 check made payable to the Department of State.			
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circ	cle		

Tallahassee, FL 32301

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

statement of che	provisions of section ange is submitted for er to change its regist	a corporation orga	nized under the la	ws of the State of	Flo	orida		
	the corporation: Puls			THE STATE OF				
	office address: 4568			rille, FL 32578				
3. The mailing a	address (if different):							
4. Date of incor	poration/qualification	1: 01/12/2009	Document	number: <u>P09000</u>	0034	60		
5. The name and Florida Depar	d street address of the	e current registered a signed, enter resign	agent and registere ed)	ed office on file w	/i th th	ıe		
	Jeffrey Roberts					7.	<u>~</u>	
	4564 Commercial D) DEC	
	Niceville, FL 32578						C 17	
6. The name and (if changed):	d street address of the				fice		AH S	\Box
	Corporation Service	e Company			_	\$ F	ယ္	
	1201 Hays Street							
		P.O. Box NOT	•					
	Tallahassee		FL	32301				
The street addre as changed will	ess of its registered o be identical.	ffice and the street	address of the bus	siness office of it	s regi	istered ag	gent,	
Such change wa authorized by th	as authorized by reso the board, or the corpo	lution duly adopted oration has been no	l by its board of di tified in writing of	irectors or by an fithe change.	office	er so		
			Jeffery A. DePla	inty	VP	& Secre	tary	
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm Conforatio Sign	the appointment as representation the appointment as representation of the appointment as representation of the appointment is document is being that the corporation of Service Companion of the appointment of Registered Agent	ovisions of all state familiar with and a filed merely to refle has been notified in	d agree to act in the street to the cocept the obligation of the color of the color of this change in the color of this change in the color of the c	e proper and com on of my position e registered offic		egistered iress, I	 !	
it signing on bel	half of an entity:	Roxanne Turner sst. Vice Preside						
Ту	ped 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 * * *