## P1000061451

| (Re                                     | questor's Name)   |      |  |  |  |
|---|-------------------|------|--|--|--|
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| (Ad                                     | dress)            |      |  |  |  |
| (City/State/Zip/Phone #)                |                   |      |  |  |  |
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04/20/16--01019--007 \*\*35.00



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: April 18, 2016

Order#: 089713/001

Re: HI-TECH HOLDINGS, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Janis M. Smith c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

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

INCA.XCOA

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

| statement of change is si  | ns of sections 607.0502, 617.0502<br>ubmitted for a corporation organi<br>nge its registered office or registe  | ized under the la   | rws of the State of <u>F</u>  | LORIDA                 |                 |
|--|---|---|---|------------------------|-----------------|
| 1. The name of the corpo   | oration: HI-TECH HOLDINGS, IN   | C.  |   |                        |                 |
| 2. The principal office at 1901 South Meyers   | ddress:<br>Road, Oakbrook Terrace, IL 601   |   |   |                        |                 |
| 3. The mailing address (   | if different):  |   |   |                        |                 |
| 4. Date of incorporation/  | Date of incorporation/qualification: 07/28/2010 Document number: P10000   |   |   | 61451                  |                 |
|  | ddress of the current registered ag<br>f State: (If resigned, enter resigned  |   | ed office on file wit   | th the                 |                 |
| CT CO  | RPORATION SYSTEM  |   |   |                        |                 |
| 1200 S   | . PINE ISLAND ROAD  |   |   |                        | <del>ن</del>    |
| PLANT  | ATION   | FL  | 33324   | 16 A                   | Nist of Section |
| 6. The name and street a (if changed):   | ddress of the new registered agen   | t (if changed) an   | nd /or registered off   |                        |                 |
| Corpora  | ation Service Company   | · · · · · · · · · · · · · · · · · · ·   |   | 3                      | 2018年           |
| 1201 H   | ays Street  |   |   |                        | 2 10 K          |
| Tallaha<br>————  | P.O. Box NOT a  | acceptable<br>FL  | 32301   |                        |                 |
| The street address of its as changed will be ident   | registered office and the street a  | ddress of the bu  | isiness office of its   | registered a           | gent,           |
| Such change was author authorized board  | ized by resolution duly adopted<br>, or the corporation has been noti   | by its board of cified in writing of  | directors or by an o<br>of the change.  | officer so             |                 |
| Salature of all off  | ncer or director  | Dona Priebe   | ed or typed name and title  | Vice Presid            | lent<br>—       |
| I hereby accept the apport further agree to complete performance of my dutien agent. Or, if this docum | ointment as registered agent and<br>ly with the provisions of all statu<br>es, and I am familiar with and ac<br>tent is being filed merely to refle<br>corporation has been notified in | agree to act in<br>tes relative to th<br>cept the obligat<br>ct a change in t | this capacity.<br>ne proper and comp<br>tion of my position<br>he registered office | olete<br>as registered | d               |
| -  | egistered Agent   | \   | Date  |                        | _ <del>_</del>  |
| If signing on behalf of a  | •   | •   |   |                        |                 |
| Grace E. Kirby, Assistan   |   |   |   |                        |                 |

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