## P11970

Requestor's Name	)
Address)	
Address)	
City/State/Zip/Phor	ne #)
☐ WAIT	MAIL
Business Entity Na	ame)
Document Numbe	r)
Certificate	es of Status
o Filing Officer:	
RATIONS ATIONS BRIDA	
<u> </u>	
Office Use C	inly
	Address)  Address)  City/State/Zip/Phor  WAIT  Business Entity Na



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Jiminez ashley.jiminez@cscglobal.com

Date: December 11, 2017

Order#: 946285-023

Re: SCOTT TECHNOLOGIES, INC.

Enclosed please find:

XX 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: Ashley Jiminez c/o Corporation Service Company 251 Little Falls Drive 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	provisions of sections 607.0502, 617.050 inge is submitted for a corporation organ r to change its registered office or regist	nized under the la	rws of the State of FLORIDA DE	
1. The name of t	he corporation: SCOTT TECHNOLOGIE	ES, INC.		
2. The principal	office address: 4700 EXCHANGE COU	RT, SUITE 300, E	BOCA RATON, FL 33431	
			,	
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification; 10/31/1986	Document	лиmber: P11970	
	I street address of the current registered a trnent of State: (If resigned, enter resigne		ed office on file with the	
	CT CORPORATION SYSTEM			
	1200 S. PINE ISLAND ROAD			
	PLANTATION, FL 33324		DEC DEC	<u> </u>
6. The name and (if changed):	d street address of the new registered age	nt (if changed) an	ad /or registered office	F
	Corporation Service Company		70. 7	<u>;</u>
	1201 Hays Street		201	<u>ہ</u>
	P.O. Box NOT Tallahassee	`acceptable FL	32301	
The street addre	ess of its registered office and the street be identical.			
Such change was authorized by the	is authorized by resolution duly adopted the board, or the corporation has been no	l by its board of c tified in writing c	directors or by an officer so of the change.	
Signatur	of an officer or director		erty, Assistant Secretary	
perjormance of agent. Or, if the hereby confirm	the appointment as registered agent an to comply with the provisions of all stat my duties, and I am familiar with and a is document is being filed merely to refl that the corporation has been notified i n Service Company	iccept the obligat ect a change in ti	tion of my position as registered he registered office address. I	
By:	the of Registered Agen:	12/07/20	Date	
If signing on bel	half of an entity:			
Grace E. Kirby,	Assistant Vice President			
Ty	rped or Frinted Name			

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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