## P14000044438

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## COVER LETTER

TO: Amendment Section Division of Corporations

AME OF CORPORATION: Warner Electric Inc						
DOCUMENT NUMBER: _	P14	1000044438				
The enclosed Articles of Ame	ndment and fee are su	abmitted for filing.				
Please return all corresponder	ice concerning this ma	atter to the following	ng:			
		Pe	ggy Nyla	and		
		Name of Cont	act Person	n		-
		Firm/ Con	npany			_
			<u>x 4561</u>			_
		Addre				
		Clearwa				_
		City/ State and	l Zip Cod	e		
		pnyland65(				
E-	mail address: (to be u	sed for future annu	ial report	notification	n)	
For further information conce	rning this matter, pleas	se call:				
Pe	eggy Nyland	at (	727	)	808-4859	
Name of Conta	ict Person		Area Co	đe & Dayti	me Telephone Numbe	Γ
Enclosed is a check for the fo	lowing amount made	payable to the Flo	rida Depa	artment of S	State:	
	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Certified Cop (Additional co enclosed)	Dy	Certifi Certifi (Addit	D Filing Fee cate of Status ed Copy ional Copy losed)	
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 Circle				

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## Warner Electric

	warrier clectin	C .		
(Name of Corporation	as currently filed v	vith the Florida Dep	t, of State)	
	P1400004	14438		
(Documen	t Number of Corpor	ation (if known)		
Pursuant to the provisions of section 607.1006, Florida St its Articles of Incorporation:	atutes, this Florida	Profit Corporation a	dopts the follow	ing amendment(s) to
A. If amending name, enter the new name of the corp-	oration:			
	N/A			The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abl	"Inc." or "Co". A			abbreviation
B. Enter new principal office address, if applicable:		N/A		
(Principal office address MUST BE A STREET ADDRI	<u> </u>			
			· · · · · · · · · · · · · · · · · · ·	<del></del>
C. Enter new mailing address, if applicable:		PO Box 4561		
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )				
	<del></del> -	Clearwater, FL 33758		<del></del> .
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		lorida, enter the nan	ne of the	
Name of New Registered Agent	N/A			
			——————————————————————————————————————	_
	(Florida street addre	ws)		<del></del>
New Registered Office Address:			. Florida	
	(Cĩţı)			o Codej
			5.5	
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I as		accept the obligation.	s of the position	
, , , ,	•	,	- A	
			Ç/; •	h
	N/A		<u> </u>	
Signatu	re of New Registered	d Agent, if changing	<b>0</b>	
			50-1 inc	<b>L</b> . J

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u> <u>John</u>	Doc	
X Remove	<u>V</u> <u>Mike</u>	: Jones	
_X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	P	Paul A. Diaz	10801 Starkey Rd.
X_Add			Ste 104, #312
Remove			Seminole, FL 33777-1160
2) Change	<u> VP</u>	_Rob_Rimback	1.1.27_Pogonia_Dr
Add			Lakeland, FL 33811
X Remove			
3) Change			
Add			
Remove			·
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
N/A	
, <del></del>	
•	
f an amandment aroyides for an eych	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

The date of each amendment(s) adoption: _	N/A	if other than the
date this document was signed.		<del>-</del>
Effective date <u>if applicable</u> :	N/A	
	(no more than 90 days after amendment file da	ite)
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory tiling requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s) (C	CHECK ONE)	
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	ne shareholders. The number of votes cast for the a rapproval.	mendment(s)
	the shareholders through voting groups. The following group entitled to vote separately on the amendm	
"The number of votes cast for the an	nendment(s) was/were sufficient for approval	
by	oting group)	
(1	oting group)	
☐ The amendment(s) was/were adopted by the action was not required.	e board of directors without shareholder action and	I shareholder
☑ The amendment(s) was/were adopted by the action was not required.	ie incorporators without shareholder action and shareholder	reholder
Dated	18 / Dan	
(By a director, pr selected, by an in	esident or other officer – if directors or officers hav corporator – if in the hands of a receiver, trustee, or try by that fiduciary)	
_	Donald W Warner	
	(Typed or printed name of person signing)	
	Vice President Operations	
	(Title of person signing)	<del>-</del>