2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P19723

EADDY, BLAKE

760 S. WOLF RD.

WHEELING, IL 60090

Name: Address:

City-St-Zip:

Entity Name: BOWE BELL & HOWELL COMPANY

FILED Nov 12, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 760 S. WOLF RD WHEELING, IL 60090 **Current Mailing Address: New Mailing Address:** 760 S. WOLF RD WHEELING, IL 60090 FEI Number: 36-3580100 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: MICHAEL SERAPHIN Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition LOMBARD, JOHN MARTON, GEORGE Name: Name: 3501 B TRI-CENTER BLVD. 760 S. WOLF ROAD Address: Address: City-St-Zip: DURHAM, NC 27713 City-St-Zip: WHEELING, IL 60090 () Delete Title: VPT Title: () Change () Addition Name: WILHELM, MICHAEL Name: 760 S. WOLF RD Address: Address: WHEELING, IL 60090 City-St-Zip: City-St-Zip: () Delete Title: (X) Change () Addition Title: GERCKENS, CLAUS DR Name: BIALOWONS, OLIVER Name: 760 S. WOLF RD. 760 S. WOLF RD. Address: Address: City-St-Zip: WHEELING, IL 60090 City-St-Zip: WHEELING, IL 60090 Title: SD () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: BLAKE EADDY SEC 11/12/2009