## P21518

(F	Requestor's Name)			
(A	Address)	·		
( <i>F</i>	Address)	- · · ·		
·	·			
(0	City/State/Zip/Phone #)	)		
PICK-UP	WAIT	MAIL		
(E	Business Entity Name)			
(Document Number)				
Certified Copies	Certificates o	of Status		
Special Instructions to Filing Officer:				
J. HORNE				
OCT - 7 2022				

Office Use Only



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FINED FOLLOW D. SECURIOR SECUR

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195				
REFERENCE : 9677207 7731108				
AUTHORIZATION STREET				
COST LIMIT : \$ 35.00				
ORDER DATE : September 22, 2022				
ORDER TIME : 1:52 PM				
ORDER NO. : 967720-038				
CUSTOMER NO: 7731108				
~~				
CHANGE OF AGENT				
NAME: INSTRUMENT & VALVE SERVICES COMPANY				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY				
CONTACT PERSON: Eyliena Baker				
EXAMINER'S INITIALS:				

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

•	•	502, 607.1508, or 617.1508, Florida Stanized under the laws of the State of ${\sf D}$	_
_		istered agent, or both, in the State of Flo	
1. The name of t	he corporation: INSTRUMENT & VAL	VE SERVICES COMPANY	
2. The principal	office address: 205 South Center Stre	et P.O. Box 190 Marshalltown, IA 501	58
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 10/27/1988	Document number: P21518	
	street address of the current registered tment of State: (If resigned, enter resig	dagent and registered office on file with ned)	n the
	C T CORPORATION SYSTEM		_3
	1200 S. PINE ISLAND ROAD		INTLO
	PLANTATION	FL 33324	温温
6. The name and (if changed):	street address of the new registered ag	gent (if changed) and /or registered offic	Service of
	Corporation Service Company		
	1201 Hays Street		
	P.O. I	Box NOT acceptable	
	Tallahassee	FL 32301	
The street addre	ss of its registered office and the stre be identical.	et address of the business office of its	registered agent,
Such change wa authorized by th	s authorized by resolution duly adopte board, or the corporation has been	ted by its board of directors or by an onotified in writing of the change.	flicer so
Xie	e & Conei	JILL CILMI	VICE PRESIDENT
/ 1	e of allustricer or director	Printed or typed name and title	
I herety accept I further agree t of my duties, an document is beit corporation has Corporation	the appointment as registered agent of a comply with the provisions of all stand accept the one filed merely to reflect a change in been notified in writing of this change in Service Company	and agree to act in this capacity. atutes relative to the proper and comp bligation of my position as registered a the registered office address. I hereby ge.	lete performance agent. Or, if this confirm that the
Signature of Registered Agent		09/28/2022 Date	
If signing on bel	•		
GRACE E. KIRB	Y, ASST. VICE PRESIDENT		

Typed or Printed Name

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

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)