P22578

(Re	questor's Name)			
(Ad	dress)			
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(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Na	me)		
(Document Number)				
Certified Copies	_ Certificate	s of Status		
Special Instructions to Filing Officer:				

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RARDON8



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard llockar2@cscinfo.com

Date: February 7, 2014

Order#: 964044-241

Re: PENTAIR VALVES & CONTROLS, 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: Lindsey Lockard c/o Corporation Service Company 2711 Centerville Road, Suite 400

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 ch	ange is submitted for a corporation orga	02, 607.1508, or 617.1508, Florida Statutes nized under the laws of the State of $\frac{TX}{}$ tered agent, or both, in the State of Florida.			
1. The name of	the corporation: PENTAIR VALVES & C	ONTROLS, INC.			
2. The principa					
3. The mailing	address (if different):				
4. Date of incom	rporation/qualification: 01/17/1989	Document number: P22578			
	nd street address of the current registered artment of State: (If resigned, enter resign	agent and registered office on file with the ned)			
	C T CORPORATION SYSTEM		+ 12		
	1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				
	PLANTATION	FL 33324	古一流		
6. The name ar (if changed):	nd street address of the new registered age	ent (if changed) and /or registered office	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
	Corporation Service Company		4-		
	1201 Hays Street				
	P.O. Box NOT acceptable				
	Tallahassee	FL 32301			
The street addr as changed wil	ress of its registered office and the stree Il be identical.	t address of the business office of its registe	ered agent,		
Such change wanthorized by	vas authorized by resolution duly adopte the board, or the corporation has been no	d by its board of directors or by an officer of the change.	so		
1		Dona Priebe, Vice President			
Signa	ture (a officer or director	Printed or typed name and title			
I further agree performance o agent. Or, if the hereby confirm	of my duties, and I am familiar with and	nd agree to act in this capacity. tutes relative to the proper and complete accept the obligation of my position as reg flect a change in the registered office addre in writing of this change.	istered ess, I		
By:	in anement	01/29/2014			
Si	gnature of Registered Agent	Date			
If signing on b	ehalf of an entity:				
Sylvia Quepp	et, Assistant Vice President				
	Typed or Printed Name				

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