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| (Re | questor's Name) | | | | | |
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| PICK-UP | ☐ WAIT | MAIL | | | | |
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| IN SERVICE COMPANY. | | | | | |
|-------------------------------------|------------------|----------------|------------------|--|--|
| | ACCOUNT NO. | : | 072100000032 | | |
| | REFERENCE | : | 745347 7366146 | | |
| | AUTHORIZATION | : | Darbeland | | |
| | COST LIMIT | : | \$ 35.00 | | |
| ORDER DATE : | December 8, 2005 | - | | | |
| ORDER TIME : | 10:06 AM | | | | |
| ORDER NO. : | 745347-050 | _ | | | |
| CUSTOMER NO: | 7366146 | | | | |
| | | | , | | |
| CHANGE OF AGENT | | | | | |
| | | | | | |
| NAME: CEQUENT TOWING PRODUCTS, INC. | | | | | |
| | | | | | |
| | | | | | |
| PLEASE RETURN | THE FOLLOWING AS | PR | ROOF OF FILING: | | |
| | IED COPY | - - | | | |
| XX PLAIN | STAMPED COPY | - | | | |
| | | | | | |
| CONTACT PERSON | : Darlene Ward | | | | |
| | EX | IMA | INER'S INITIALS: | | |

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

| statement of cha | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Sta inge is submitted for a corporation organized under the laws of the State of $\frac{D}{D}$ or to change its registered office or registered agent, or both, in the State of Flor | elaware | | _ |
|---|--|--------------------------------|----------------------------|---------------------|
| 1. The name of t | the corporation: CEQUENT TOWING PRODUCTS, INC. | | <u> </u> | |
| 2. The principal | office address: 39400 Woodward Ave., Suite 130, Bloomfield Hills, MI 48304 | | | |
| 3. The mailing a | address (if different): | | | |
| 4. Date of incorp | poration/qualification: 07/17/1990 Document number: P30617 | | | |
| | d street address of the current registered agent and registered office on file with riment of State: | the | | |
| 1 | CT Corporation System | SEGF | 2005 [| |
| | 1200 S. Pine Island Road | AHAS: | 005 DEC 13 AM 11: | <u> </u> |
| | Plantation, FL 33324 | Y OF | ω 2 | LED |
| 6. The name and (if changed): | d street address of the new registered agent (if changed) and /or registered office | STATE | 111:15 | |
| | Corporation Service Company | | | |
| | 1201 Hays Street | | | |
| | (P.O. Box NOT acceptable) | | | |
| | Tallahassee, FL 32301 | | | |
| The street address changed will | ess of its registered office and the street address of the business office of its I be identical. | register | ed age | ent, |
| Such change w authorized by t | as authorized by resolution duly adopted by its board of directors or by an of the board, or the corporation has been notified in writing of the change. | officer s | 0 | |
| (Signat | Maureen Cullen, Attorney in Fact (Printed or typed name and tit) | le) | | _ |
| I further agrée of my duties, an document is be corporation ha | t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and comp nd I am familiar with and accept the obligation of my position as registered ing filed merely to reflect a change in the registered office address, I hereby ts been notified in writing of this change. In Service Company | nlete per agent. confiri | rforma Or, if n that | ince this the |
| By: | 12/07/2005 | | | <u> </u> |
| • | ignature of Registered Agent) (Date) ehalf of an entity: | | | |
| . · | wson, Asst. Vice President | | | |
| | Typed or Printed Name) | | | |

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