DOC ID ----> 200335701614

DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
12/24/2003	200335701614	TRADE NAME RENEWAL (RNR)	25.00	.00	.00	.00	.00

Receipt

This is not a bill. Please do not remit payment.

SPEER MECHANICAL
ATTN: POLLY SHEA
600 OAKLAND PARK AVENUE
COLUMBUS, OH 43214

STATE OF OHIO

Ohio Secretary of State, J. Kenneth Blackwell

RN182905

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

MECHANICAL SERVICES, INC.

and, that said business records show the filing and recording of:

Document(s)	Document No(s):
TRADE NAME RENEWAL	**200335701614**

United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 12th day of December, A.D. 2003.

J. Kenneth Blackwell

Ohio Secretary of State

DOC ID ----> 200335701614

Prescribed by **J. Kenneth Blackwell**
Ohio Secretary of State
Central Ohio: (614) 466-3910
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

2003 DEC 12 PM 2:

www.state.oh.us/sos
e-mail: busserv@sos.state.oh.us

Expedite this Form: (Select One)	
Mail Form to one of the Following:	
22 Yes	PO Box 1390 Columbus, OH 43216 *** Requires an additional fee of $100 ***
● No	PO Box 788 Columbus, OH 43216

RENEWAL

(For Domestic or Foreign, Profit or Non-Profit)
Filing Fee $25.00

THE UNDERSIGNED HEREBY STATES THE FOLLOWING:

(CHECK ONLY ONE (1) BOX)

☑ Renewal of Trade Name	☐ Renewal of Fictitious Name	☐ Renewal of Service Mark or Trade Mark
(172-RNR)	*(159-NFR)*	*(166-TSMR)*
Reg. No. RN182905	*Reg. No.*	*Reg. No.* Must Be Accompanied by Specimen

Name of Entity or Description of Mark to be Renewed: MECHANICAL SERVICES, INC.

Name of Applicant Renewing Name or Mark: Julian Speer Co.
(Name of Applicant)

The Applicant is (Check Appropriate Box)

- ☐ Individual
- ☐ Limited Partnership: Secretary of State Reg. No.
- ☐ Ohio Limited Liability Company, Reg. No.
- ☑ Ohio Corporation, Charter No. 260721
- ☐ General Partnership
- ☐ Other
- ☐ Foreign Corporation incorporated in the state of ____ holding Ohio license no. ____
- ☐ Unincorporated Association
- ☐ Foreign Limited Liability Company holding Ohio Reg. No. ____ organized in the state of ____

Business Address: 600 Oakland Park Avenue
(Street Address) ***NOTE: P.O. Box Addresses are NOT acceptable.***

Columbus *(City)* | Franklin *(County)* | Ohio *(State)* | 43214 *(Zip Code)*

General Partners Names & Addresses *(If Applicable)*
(Attach Additional Sheet If Needed)

REQUIRED
Must be authenticated **(signed)** by an authorized representative
(See Instructions)

Authorized Representative

Date: 12/8/03