DOC ID ----> 200618603264

DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
07/06/2006	200618603264	DOMESTIC AGENT SUBSEQUENT APPOINTMENT (AGS)	25 00	00	.00	00	.00

Receipt

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

HYDROSOL SYSTEM, INC.
4216 KARG INDUSTRIAL PKWY
KENT, OH 44240

STATE OF OHIO
CERTIFICATE
Ohio Secretary of State, J. Kenneth Blackwell

878019

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

HYDROSOL SYSTEM, INCORPORATED

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

Document(s)	Document No(s):
DOMESTIC AGENT SUBSEQUENT APPOINTMENT	**200618603264**

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 3rd day of July, A.D. 2006.

J. Kenneth Blackwell

Ohio Secretary of State

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

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

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

STATUTORY AGENT UPDATE

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

2006 JUN -9 PM 2:33

THE UNDERSIGNED DESIRING TO FILE A:

(CHECK ONLY ONE (1) BOX)

(1) Subsequent Appointment of Agent	(2) Change of Address of an Agent	(3) Resignation of Agent
☒ Corp ☐ LP (165-AGS) ☐ LLC (171-LSA)	☐ Corp ☐ LP (145-AGA) ☐ LLC (144-LAD)	☐ Corp ☐ LP (155-AGR) ☐ LLC (153-LAG)

Complete ALL of the general information in this section for the box checked above.

Name of Entity Hydrosol System Incorporated

Charter or Registration No. 878019

Name of Current Agent Robert Tomaro (deceased)

Complete the information in this section if box (1) is checked.

Name and Address of New Agent

Michael A. Creveling
(Name)

88 S. Portage Path, Suite 306
(Street) *NOTE: P.O. Box Addresses are NOT acceptable.*

Akron *(City)* | Summit *(County)* | Ohio *(State)* | 44303 *(Zip Code)*

ACCEPTANCE OF APPOINTMENT

The Undersigned, Michael A. Creveling, named herein as the Statutory agent for, Hydrosol System Incorporated, hereby acknowledges and accepts the appointment of statutory agent for said entity

Signature: _____
(Statutory Agent) Michael A. Creveling

* If the entity listed is a foreign corporation, the agent does not have to sign the **Acceptance of Appointment**

JUN 29 2006

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Complete the information in this section if box (2) is checked.

Old Address of Agent

(Street) *NOTE: P.O. Box Addresses are NOT acceptable.*

(City) Ohio (State) (Zip Code)

New Address of Agent

(Street) *NOTE: P.O. Box Addresses are NOT acceptable.*

(City) Ohio (State) (Zip Code)

Complete the information in this section if box (3) is checked.

Is this agent resigning? ☐ Yes ☐ No

Current or last known address of the entity's principal office where a copy of this Resignation of Agent was sent as of the date of filing or prior to the date filed

(Street) *NOTE: P.O. Box Addresses are NOT acceptable.*

(City) (State) (Zip Code)

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

Matin C Burnell
Authorized Representative

6/30/06
Date