DOC ID ----> 200806600792

DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
03/06/2008	200806600792	DOMESTIC AGENT SUBSEQUENT APPOINTMENT (AGS)	25.00	.00	.00	.00	.00

Receipt

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

CARLILE, PATCHEN & MURPHY
366 E. BROAD STREET
ATTN M CARRION
COLUMBUS, OH 43215

STATE OF OHIO
CERTIFICATE
Ohio Secretary of State, Jennifer Brunner

852856

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

CPM STATUTORY AGENT CORP.

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

Document(s)	Document No(s):
DOMESTIC AGENT SUBSEQUENT APPOINTMENT	**200806600792**

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 27th day of February, A.D. 2008.

Ohio Secretary of State

DOC ID ----> 200806600792

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

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

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

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 CPM STATUTORY AGENT CORP.

Charter or Registration No. 852856

Name of Current Agent RICHARD V. PATCHEN

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

Name and Address of New Agent

MICHAEL A. SMITH
(Name)
366 EAST BROAD STREET
(Street) ***NOTE: P.O. Box Addresses are NOT acceptable.***

COLUMBUS *(City)* | FRANKLIN *(County)* | **Ohio** *(State)* | 43215 *(Zip Code)*

ACCEPTANCE OF APPOINTMENT

The Undersigned, MICHAEL A. SMITH, named herein as the Statutory agent for, CPM STATUTORY AGENT CORP., hereby acknowledges and accepts the appointment of statutory agent for said entity.

Signature: _____
Michael A. Smith, Statutory Agent

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

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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)

ADMN.213
Doc #774384.1

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

Michelle Carrion
Michelle Carrion, Assistant Secretary

February 25, 2008
Date