



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
06/01/2015	201514901239	SUBSEQUENT AGENT APPOINTMENT (AGS)	25.00	0.00	0.00	0.00	0.00

Receipt

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

EASTMAN & SMITH LTD.
ATTN: ANN M. BELLA
P.O. BOX 10032
TOLEDO, OH 43699-0032

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted
1817665

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

ADVANCE GLOBAL BUSINESS SOLUTIONS, INC.

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

Document(s)

SUBSEQUENT AGENT APPOINTMENT

Effective Date: 05/26/2015

Document No(s):

201514901239



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
1st day of June, A.D. 2015.

Ohio Secretary of State

From: unknown Page: 3/5 Date: 5/26/2015 3:00:07 PM



Form 521 Prescribed by:
JON HUSTED
 Ohio Secretary of State

Central Ohio: (614) 466-3910
 Toll Free: (877) SOS-FILE (767-3453)
www.OhioSecretaryofState.gov
Bussserv@OhioSecretaryofState.gov

Mall this form to one of the following:

Regular Filing (non expedite)
 P.O. Box 788
 Columbus, OH 43216

Expedite Filing (Two-business day processing
 time requires an additional \$100.00).
 P.O. Box 1390
 Columbus, OH 43216

Statutory Agent Update Filing Fee: \$25

(CHECK ONLY ONE(1) BOX)

(1) Subsequent Appointment of Agent

- ☒ Corp (165-AGS)
☐ LP (165-AGS)
☐ LLC (171-LSA)
☐ Business Trust
 (171-LSA)
☐ Real Estate Investment Trust
 (171-LSA)

(2) Change of Address of an Agent

- ☐ Corp (145-AGA)
☐ LP (145-AGA)
☐ LLC (144-LAD)
☐ Business Trust
 (144-LAD)
☐ Real Estate Investment Trust
 (144-LAD)

(3) Resignation of Agent

- ☐ Corp (165-AGR)
☐ LP (155-AGR)
☐ LLC (153-LAG)
☐ Partnership (153-LAG)
☐ Business Trust
 (153-LAG)
☐ Real Estate Investment Trust
 (153-LAG)

Name of Entity **ADVANCE GLOBAL BUSINESS SOLUTIONS, INC.**

Charter, License or Registration No. **1817665**

Name of Current Agent **CHARLES D. NIEHAUS**

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

Name and Address
 of New Agent

GRAHAM A. BLUHM

Name of Agent

P. O. BOX 10032

Mailing Address

TOLEDO

City

Ohio

State

43699-0032

Zip Code

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Complete the information in this section if box (1) is checked and business is an Ohio entity**ACCEPTANCE OF APPOINTMENT FOR DOMESTIC ENTITY'S AGENT**The Undersigned, GRAHAM A. BLUHM, named herein as the
Name of Agentstatutory agent for ADVANCE GLOBAL BUSINESS SOLUTIONS, INC., hereby acknowledges
Name of Business Entity

and accepts the appointment of statutory agent for said entity.

Signature:

Graham A. Bluhm

Individual Agent's Signature/Signature on behalf of Business Serving as Agent

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

New Address of Agent

Mailing Address
CityOhio
State
Zip Code**Complete the information in this section if box (3) is checked**

The agent of record for the entity identified on page 1 resigns as statutory agent.

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.

Mailing Address
City
State
Zip Code

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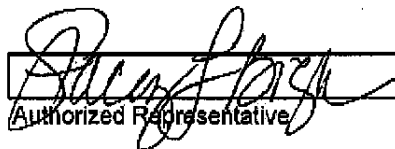
By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required

Agent update must be signed by an authorized representative (see instructions for specific information).

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.

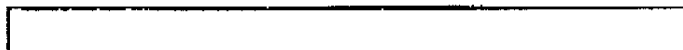

Authorized Representative

XX

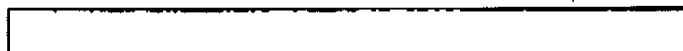
By (if applicable)

STACEY L. BIGELOW, PRESIDENT

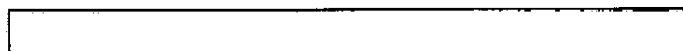
Print Name



Authorized Representative



By (if applicable)



Print Name