

DATE 01/09/2020 DOCUMENT ID 202000900348

DESCRIPTION Foreign/Amendment (FAM) FILING 50.00 EXPED 100.00 0.00

COPY 0.00

Receipt

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

DILLS FIRE AND SAFETY 20213 SR 93 WELLSTON, OH 45692

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Frank LaRose 2236076

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

JOHNSON'S FIRE EQUIPMENT COMPANY

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

Document(s)

Foreign/Amendment

Document No(s):

202000900348

Effective Date: 01/09/2020

CRETARY OF STATE OF S

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 9th day of January, A.D. 2020.

Ohio Secretary of State

Filther

Form 565 Prescribed by:



Toll Free: 877.767.3453 | Central Ohio: 614.466.3910

OhioSoS.gov | business@OhioSoS.gov

File online or for more information: OhioBusinessCentral.gov

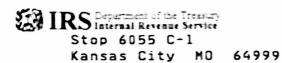
Certificate of Amendment to Foreign Licensed Corporation Application (For-profit or Nonprofit Foreign Corporation)

Filing Fee: \$50 (179-FAM) Form Must Be Typed

A foreign corporation must file a Certificate of Amendment if, in amending its articles of incorporation, it modifies any of the information included in its application for license to transact business in Ohio or in any amendment to that application.

Complete the followin	ng information (as currently on file in the Onio Secretary of State's Office).
The foreign corporation	on named below amends its application for its license to transact business in Ohio.
	DILL'S FIRE & SAFETY EQUIPMENT CO., INC.
Name of Corporation	
[
(as registered in Jurisdicti	ion of Formation)
Assumed Name used i	in Ohio (if applicable)
Jurisdiction of Formation	on WEST VIRGINIA
Ohio License Number	2236076
Complete only the i	information below that has been amended.
State's Office.	Johnson's Fire Equipment Company
(as registered in Jurisdicti	ion of Formation)
Assumed Name used i	in Ohio (if applicable)
Jurisdiction of Formatic	on
Location of principal o	office
20213 State Route 9	93
Mailing Address	
Wellston	Ohio 45692
City	State ZIP Code

Location of any Ohio office		
20213 State Route 93		
Mailing Address		
Wellston	ОН	45692
City	State	ZIP Code
A brief summary of the corporate	purpose(s) to be exercised within the state:	
Sales and Service of Firefighting v	ehicles and equipment	
L		
By signing and submitting this fo	orm to the Ohio Secretary of State, the undersigned hereb	y certifies that he or she
has the requisite authority to exe	cute this document.	
Required		
·		
Must be signed by an authorized officer of the	Signature	
corporation.		
Marthada da como contesta	By (if applicable)	
If authorized representative is an individual, then they	F	
must sign in the "signature"	Tony J. Johnson	
box and print their name in the "Print Name" box.	Print Name	
If authorized representative is a business entity, not an		
individual, then please print	Johnson's Fire Equipment Company	
the business name in the "signature" box, an	Signature	
authorized representative		
of the business entity	By (if applicable)	
must sign in the "By" box and print their name in the		
"Print Name" box.		
	Print Name	
	Signature	
	By (if applicable)	
	Tony J. Johnson	
	Print Name	



OMB Clearance No.: 1545-0074

In reply refer to: 0922372313 Dec. 27, 2019 LTR 252C 0

55-0561999 000000 00

Input Op: 0922372313 00005757

BODC: WI



JOHNSONS FIRE EQUIPMENT COMPANY PO BOX 339 RAVENSWOOD WV 26164



016457

Taxpayer Identification Number: 55-0561999

Dear Taxpayer:

Thank you for the inquiry dated Sep. 12, 2019.

We have changed the name on your account as requested. The number shown above is valid for use on all tax documents.

If you need forms, schedules, or publications, you may get them by visiting the IRS website at www.irs.gov or by calling toll-free at 1-800-TAX-FORM (1-800-829-3676).

If you have any questions, please call Customer Service at 800-829-1040 between the hours of 7:00 a.m. and 7:00 p.m. CDT.

If you prefer, you may write to us at the address shown at the top of the first page of this letter.

Whenever you write, please include this letter and, in the spaces below, give us your telephone number with the hours we can reach you. Also, you may want to keep a copy of this letter for your records.

Telephone Number () Hours
