Sisc, Inc.
P.O. Box 781238
Orlando, FL 32878-1238

Address

Address

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. (Corporation Name) (Document #)

2. (Corporation Name) (Document #)

3. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)

Photocopy

7864H -777	NEW FILINGS
	Profit
	NonProfit
	Limited Liability
	Domestication
	0.1

Walk in

Mail out

	AMENDMENTS
	Amendment
	Resignation of R.A., Officer/ Director
>	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

Pick up time

☐ Will wait

500000333.00 10/16/97 -01016 -00 9

OTHER FILINGS
Annual Report
Fictitious Name
Name Reservation

が開発	REGISTRATION/ QUALIFICATION
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

10-17-97

Examiner's Initials

Certified Copy

Certificate of Status

CC

Florida Department of State, Sandra B. Mortham, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 63 the undersigned corporation organized under the laws of the submits the following statement in order to change its registered offic both, in the State of Florida.	7.1508, Florida Statutes, State of <u>Florida</u> e or registered agent, or
1a. The name of the corporation is: Simulation Interoperabil	ity Standards
Organitation, Inc.	
1b. The mailing address of the corporation is: <u>F.O. Box</u> 781238, 32878-1238	Orlando, Florida
1c. Date of incorporation: 2/26/97 Document number:	N97000001100
2. The name and address of the current registered agent and office:	
3280 Progress Drive	
Orlando, Florida 32826	* (3) ***
3. The name and address of the new registered agent and office:(P.O. Box Christina Bouwens 1013 Butter Creek Ct. Dvieds Florida 32765 The street address of its registered office and the street address of the	73
registered agent, as changed, will be identical. Such change was authorized by resolution duly adopted by its board of d so authorized by the b oard,	irectors or by an officer
Signature of an officer chairman or	5/97 Date)
wee chainfail of the board)	Dawj
(Printed or typed name and tide)	
Having been named as registered agent and to accept service of proce corporation, I herebyaccept the appointmentas registered agentand agro I further agree to comply with the provisions of all statutes relative to t performance of my duties, and I am familiar with and accept the oblig registered agent.	ee to act in this capacity.
Mustina L. Brewens 10/5	197
(Signature of Registered Agent)	Date)
If signing on behalf of an entity:	
(Typed or Printed Name) (Ca	pacity)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$35.00

CR2EO45(11/94)