

PO2-000102248

Florida Department of State
Division of Corporations
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SOB SOFTWARE CORPORATION

Name of Corporation

DOCUMENT NUMBER: P02000102248

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cory Gerbrandt

Name of Contact Person

CT Corporation

Firm/Company

2075 Centre Pointe Blvd

Address

Tallahassee, FL 32308

City/State and Zip Code

abbas.ali@scyt1.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cory Gerbrandt

Name of Contact Person

850 558-1933

at () Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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