Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

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REGISTERED AGENT CHANGE

SPECTORSOFT CORPORATION

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Corporate Filing Menu

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9/23/2008

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

statement of ch	ange is submitted for a corporation or	.0502, 607.1508, or 617.1508, Florida Statu rganized under the laws of the State of Delx gistered agent, or both, in the State of Floric	ware	
	the corporation: SpectorSoft Corporati	•		
	l office address: 1555 Indian River Biv			
3. The mailing	address (if different):			
4. Date of incom	poration/qualification: 08/14/2008	Document number: F0800000358	3	
	d street address of the current registere priment of State:	ed agent and registered office on file with th	ន	
	C T Corporation System			
	1200 South Pine Island Road		7.0	
	Plantation, FL 33324		IS SE	
6. The name an (if changed):		agent (if changed) and /or registered office	P 23 I	
Ronald Chesley 1555 Indian River Blvd., Suite B210, Vero Beach, FL 32960 RONALD STATE OF THE S				
	1555 Indian River Blvd., Suite B210, Vero Beach, FL 32960 (P.O. Box NOT acceptable)		; 21 ORIOA	
		reet address of the business office of its re		
Such change wanthorized by t	ras authorized by resolution duly add the board, or the corporation has been	opted by its board of directors or by an offi is notified in writing of the change.	cer so	
	d Chasley	Ronald Chesley, Vice President and Se (Printed or typed name and title)		
I hereby accep I further agrée of my duties, a document is be corporation ha	t the appointment as registered agen to comply with the provisions of all nd I am familiar with and accept the sing filed merely to reflect a change t is been notified in writing of this cha	it and agree to act in this capacity, statutes relative to the proper and comple obligation of my position as registered ag in the registered office address, I hereby conge.	te performance sent. Or, if this onfirm that the	
By: Per	rold Chealey	9-5-08		
	ignature of Registered Agent)	(Date)		
	ehalf of an entity:			
	Typed or Printed Name)			
* * * FILING FEE: \$35.00 * * *				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

FL006 - DB/1 6/2005 C T System Online

CR28045 (8/05)