## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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## REGISTERED AGENT CHANGE SOE SOFTWARE CORPORATION

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C. CARRO

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## COVER LETTER

то:	Amendment Section Division of Corporations
SHRA	SOR SOFTWARE CORPORATION
	Name of Corporation
poct	P02000102248  IMENT NUMBER:
The en	closed 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@scytl.com
	E-mail address: (to be used for future annual report notification)
For fu	ther information concerning this matter, please call:
C	ory Gerbrandt 850 558-1933
	Name of Contact Person at (
Enclos	ed 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

CR210045 (03/12)

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

7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Potida	
egistered agent, or both, in the State of Florida.	**
ORPORATION	
DRIVE SUITE 525 TAMPA, FL 33609	
Document number: P02000102248	
red agent and registered office on file with the signed)	٠.,
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)	
I agent (if changed) and for registered office	
Agents, Inc.	ĘM
uth Pine Island Rond	
Exest mechania	
reet address of the business office of its registered age	nt,
opted by its board of directors or by an officer so a notified in writing of the change.	
MARC FRATELLO, Director, CEO, President	
it and agree to act in this capacity. statutes relative to the proper and complete ad accept the obligation of my position as registered reflect a change in the registered office address, i led in writing of this change.	
11114 2015	
C Partic	
perfect that	
	promized under the laws of the State of Florida cristered agent, or both, in the State of Florida.  DREVE SUITE 525 TAMPA. Ft. 33609  Document number: P02000102248  red agent and registered office on file with the signed)  agent (if changed) and for registered office  Agents, Inc.  all Pine Island Road  KOT acceptably  reet address of the business office of its registered age pted by its board of directors or by an officer so a notified in writing of the change.  MARC FRATELLO, Director, CEO, President Finites or types make and note to the proper and complete and agree to act in this capacity, standers relative to the proper and complete and accept the obligation of my position as registered reflect a change in the change.  1110   2015

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAJIASSEE, F1, 32314 CR2E045 (03/12)