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Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

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**Ent	er	the	email	address	for	this	busin	ess	entity	to	be u	sed	for	fut	uī e
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REGISTERED AGENT CHANGE ACOUSTI ENGINEERING COMPANY OF FLORIDA

Certificate of Status	0
Certified Copy	I
Page Count	02
Estimated Charge	\$43.75

To:

By:

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

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this range is submitted for a corporation organized under the laws of the State of Florida ler to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: Acousti Engineering Company Of Florida
2. The principal ORLANDO, FL	office address: 1040 Woodcock RoadSuite 100
3. The mailing a	address (if different): 1040 Woodcock RoadSuite 100 ORLANDO, FL 32803
4. Dateofincorp	poration/qualification: 02/12/1946 Document number: 145836
	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enterresigned)
	GY CORPORATE SERVICES, INC.
	GY CORPORATE SERVICES, INC. 777 S. FLAGLER DR STE 500E WEST PALM BEACH, FL 33401
	WEST PALM BEACH, FL 33401
6. The name and (ifchanged):	d street address of the new registered agent (if changed) and /or registered office 3
	C.T Corporation System
	1200 South Pine Island Road
	P.O. Box NOT acceptable
	Plantation, Florida 33324
The street address changed will	ress of its registered office and the street address of the business office of its registered agent I be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
/s/ Daniel Huffi	fman Daniel Huffman The of un officer or director Printed or typed name and title
I hereby accept I further agree to of my duties, and document is bei corporation has CT Corporation	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performane ad I am familiar with and accept the obligation of my position as registered agent. Or, if th ing filed merely to reflect a change in the registered office address. I hereby confirm that th s been notified in writing of this change.
/s/ Denise Be	40/40/000
Sigi	nature of Registered Agent Date
If signing on be	chalf of an entity:
Denise Bell	I-Assistant Secretary
Fy	yped or Printed Name
	* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TAILLAHASSEE, FL 32314 CR2E045 (04/13)