# 7000003

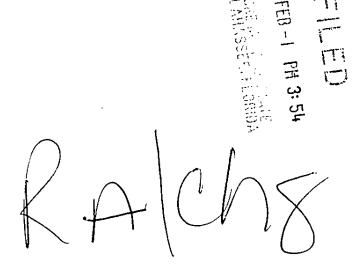
(	Requestor's Name)
(	Address)
(	Address)
(	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(	Business Entity Name)
(	Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:





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FEB 01 2016
I ALBRITTON

#### **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: Florida Tech, Inc.

Name of Corporation

DOCUMENT NUMBER:

760603

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:

#### Brenda Brown

Name of Contact Person

Florida Institute of Technology, Inc.

Firm/Company

150 W. University Blvd.

Address

Melbourne, FL 32901

City/State and Zip Code

### brendabrown@fit.edu

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

For further information concerning this matter, please call:

Brenda Brown

, 321

674-7420

Name of Contact Person

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



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

January 13, 2016

BRENDA BROWN FLORIDA INSTITUTE OF TECHNOLOGY, INC. 150 W. UNIVERSITY BLVD MELBOURNE, FL 32901

SUBJECT: FLORIDA TECH, INC.

Ref. Number: 760603

We have received your document for FLORIDA TECH, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 816A00000865

## 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 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Florida Tech, Inc.
2. The principal office address: 150 W. University Blvd.  Melbourne, FL 32901
3. The mailing address (if different): same
4. Date of incorporation/qualification: 11/05/1981 Document number: 760603
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Brenda Brown
150 W. University Blvd.
Melbourne, FL 32901
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Cathy R. Wood  150 W. University Blvd.  P.O. Box NOT acceptable  Melbourne, FL 32901
Cathy R. Wood
150 W. University Blvd.
P.O. Box NOT acceptable  Melbourne, FL 32901
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Signature of an officer or director)  Branda M. Brown Controlks  Rrinted or typed name and title
I hereby accept the appointment as registered agent and agree to act in this capacity.  I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Carty R Wood 10/2/15 Signature of Registered Agent Date
If signing on behalf of an entity:
Cathy R. Wood Typed or Printed Name
* * * FILING FEE: \$35.00 * * *