

851637

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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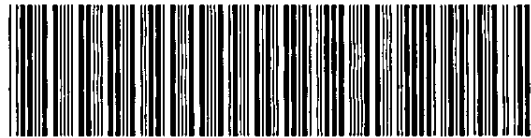
(Business Entity Name)

(Document Number)

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CORPORATION SERVICE COMPANY*

ACCOUNT NO. : I20000000195

REFERENCE : 047880 7985394

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : March 11, 2014

ORDER TIME : 9:47 AM

ORDER NO. : 047880-005

CUSTOMER NO: 7985394

CHANGE OF AGENT

NAME: EMCEE ELECTRONICS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Carina L. Dunlap

EXAMINER'S INITIALS: _____

**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 Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: EMCEE ELECTRONICS, INC.
2. The principal office address: 520 CYPRESS AVE. , VENICE, FL 34285
3. The mailing address (if different): 520 CYPRESS AVE. , VENICE, FL 34285
4. Date of incorporation/qualification: 01/18/1982 Document number: 851637
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)

CORZILIUS, DAVID

VENICE

FL 34285

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

1201 Hays Street

P.O. Box NOT acceptable

Tallahassee

FL 32301

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.

Donna New

Signature of an officer or director

Donna New

Printed 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.

Corporation Service Company

By: Carina L. Dunlap

Signature of Registered Agent

3-11-14

Date

If signing on behalf of an entity:

Carina L. Dunlap
Asst. Vice President

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

CR2E045 (03/12)

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TALLAHASSEE, FL
CORPORATION SERVICE COMPANY