Florida Department of State

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REGISTERED AGENT CHANGE

ALPHA TECHNOLOGIES SERVICES, INC.

Certificate of Status	0
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6/3/2009

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

statement of chan	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporution organized under the laws of the State of MEVADA ro change its registered office or registered agent, or both, in the State of Florida.	
1. The name of th	be corporation: ALPHA TECHNOLOGIES SERVICES, INC.	
2. The principal o	office address: 19495 SW TETON AVE, TUALATIN OR 97062	
3. The mailing ad	ddress (if different): NOT APPLICABLE	_
4. Date of incorp	poration/qualification: 11/15/2001 Document number: F01000005937	
	street address of the current registered agent and registered office on file with the timent of State:	
	C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 TO SECRETARY A SECURITY OF THE SECRETARY PINE ISLAND ROAD PLANTATION FL 33324 TO SECURITY OF THE SECRETARY PINE ISLAND ROAD PLANTATION FL 33324 TO SECURITY OF THE SECRETARY PINE ISLAND ROAD PLANTATION FL 33324 TO SECRETARY PINE ISLAND ROAD PLANTATION FL 33324	てこして
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office PROPERTY NRAI Services, Inc.	•
	2731 Executive Park Drive, Suite 4 (F.O. Bex. NOT acceptable) Weston, FL 33331	
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.	
- •	es authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
	JACK CASKEY, V.P.	
Thereby accept if further agree to of my duttes, and	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 complate performance ad I am familiar with and accept the obligation of my position as registered agent. Or, if this may filed merely to reflect a change in the registered office address, I hereby confirm that the abeen notified in writing of this change.	
- Dup	(0-1-0-9	
If signing on bel	shalf of an entity:	
	JHLMAN, ASST SECY Typed or Printed Name)	

** * FILING FEE: \$35.00 ***