## F02000001608

(Red	questor's Name)	·	
(Address)			
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(City	y/State/Zip/Phone	e #)	
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February 14, 2013

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Elcom, Inc. - Alabama

Dear Filing Officer:

Please file the attached Change of Agent for the referenced company. Enclosed please find a check for the requisite fees. Please return evidence of filing to my attention via regular mail.

If for any reason the enclosed cannot be filed upon receipt, please contact the undersigned immediately at (800) 862-5438. Thank you very much for your assistance.

Very truly yours,

Denise Bell Senior Corporate Specialist

Encl.

## **COVER LETTER**

TO:	Amendment Section Division of Corporations				
SURI	ELCOM, INC ALABAMA				
0000	Name of Corporation				
DOC	F02000001608 JMENT NUMBER:				
The er	iclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please	return all correspondence concerning this matter to the following:				
	Denise Bell				
Name of Contact Person					
	NRAI Corporate Services				
	Firm/Company				
	1021 Main Street, Ste. 1150				
	Address				
	Houston, TX 77002				
	City/State and Zip Code				
	JULIE.ERWIN@ELCOMSALES.COM				
	E-mail address: (to be used for future annual report notification)				
For fu	rther information concerning this matter, please call:				
Denise					
	Name of Contact Person Area Code & Daytime Telephone Number				
Enclos	sed is a \$35.00 check made payable to the Department of State.				
	Mailing Address: Amendment Section  Street Address: Amendment Section				
	Division of Corporations Division of Corporations				
	P.O. Box 6327 Clifton Building				
	Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301				

CR2E045 (03/12)

## 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 61 nange is submitted for a corporation organized under the law	s of the State of Alabama		
	ler to change its registered office or registered agent, or both	, in the State of Florida.		
1. The name of t	the corporation: ELCOM, INC ALABAMA			
2. The principal	al office address: 470 PROVIDENCE MAIN ST NW, SUITE 30	3, HUNTSVILLE, AL 35806		
3. The mailing a	address (if different):			
4. Date of incorp	rporation/qualification: 04/02/2002 Document n	umber: 1:02000001608		
	nd street address of the current registered agent and registered artment of State: (If resigned, enter resigned)	office on file with the		
	TOM BUCINSKI			
1331 SOUTH INTERNATIONAL PARKWAY SUITE 1261				
	LAKE MARY FL 32746	2118 52 10		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  NRAI Services, Inc.				
	NRAI Services, Inc.	me P		
	515 East Park Avenue,	FLORID		
	P.O. Box NOT acceptable			
	Tallahassee, Florida 32301	<del></del>		
as changed will				
Such change wa authorized by th	vas authorized by resolution duly adopted by its board of di the board, or the corporation has been notified in writing of	rectors or by an officer so the change.		
Benes W	Kerry Erwin, Pres			
l further agree i performance of agent. Or if the	Printed of the appointment as registered agent and agree to act in the to comply with the provisions of all statutes relative to the f my duties, and I am familiar with and accept the obligation is document is being filed merely to reflect a change in the that the corporation has been notified in writing of this cl	proper and complete on of my position as registered e revisiered office address. I		
By: NRAI	A Services, Inc.	74-13 Date		
If signing on be	ehalf of an entity:			
Denise Bell, Assi				
T	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)