

F04000001059

(Requestor's Name)

AeroSoft

5945 Airport Road, Suite 254
Mississauga, Ontario L4V 1R9
Canada

(City/State/Zip/Phone #)

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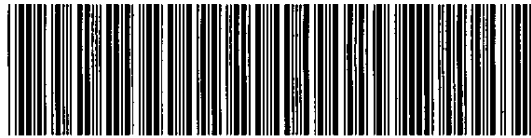
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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08/10/09

DC

**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: AEROSOFT PMI SYSTEMS INC.
2. The principal office address: 1560 SAWGRASS CORP. PKWY
SUITE 400, SUNRISE, FL 33323
3. The mailing address (if different): 5945 AIRPORT RD. SUITE 254
MISSISSAUGA, ONTARIO, CANADA L4V 1R9
4. Date of incorporation/qualification: 02/26/2004 Document number: E04000001059
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)

RESIGNED

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

CORP DIRECT AGENTS, INC.
515 EAST PARK AVENUE
P.O. Box NOT acceptable
TALLAHASSEE, FL. 32301

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TALLAHASSEE, FLORIDA

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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]
Signature of an officer or director

THANOS KAPONERIDIS, PRESIDENT
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.

Katie Wansch, Asst. Sec.
Signature of Registered Agent

July 17, 2009
Date

If signing on behalf of an entity:

Katie Wansch
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