Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850) 617-6380

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 ; (850)222-1092 : (850)878-5368 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

i 1	Address:			
	MILLE BEE.			

REGISTERED AGENT CHANGE **TUG TECHNOLOGIES CORPORATION**

Certificate of Status	0
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DEC 12 2014

T. CARTER

COVER LETTER

TO:	Amend Divisio	ment Section n of Corporations		
SUBJ	RCT•	TUG TECHNOLOGIES COI	PORATION	
0020		Name of Corp	oration	
DOCU	JMENT I	NUMBER:F040000071	47	
The en	closed St	atement of Change of Registered Office/A	agent and fee are submitted for filing.	
Please	return all	correspondence concerning this matter to	the following:	
		Ann Willaman		
		Name of Conta	ct Person	
		Textron		
		Firm/Comp	eny	
40 Westminster Street				
		Address		
		Providence, RI 02903		
		City/State and 2	ip Code	
		Owillaman @ text. B-mail address: (to be used for fatu	ran. com	
		E-mail address: (to be used for futu	re annual report notification)	
For furt	her Infor	mation concerning this matter, please call	:	
		ame of Contact Person	Arca Code & Daytime Telephone Number	
Enclose		5.00 check made payable to the Departme	•	
		Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

CR20045 (03/L2)

FLECK - 01/10/2013 Walters Khaver Deline

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

Pursuant to the provisions of sections 60 statement of change is submitted for a co	erporation organis	ed under the laws of the Sta	ate of		
In order to change its registered					
The riame of the corporation: The principal office address:	LOOS PURIOS NA PARTIE VENTAGO AND CA 30144				
The mailing address (if different): PO BOX 3028 KBNNESAW, GA 30158					
4. Date of incorporation/qualification:	12/17/2004	Document number:	F04000007147		
5. The name and street address of the cur Florida Department of State: (If resigne	rent registered age		file with the		
CORPOR	ATION SERVICE	COMPANY			
	1201 HAYS STREE	ET			
TALL	ahassee, FL 323	01-7525	·· ········		
6. The name and street address of the new (if changed):	C T Corporation S	yatom	ed office	14 DEC	TALLAHA
c/o C T Corporati	c/o C T Corporation System, 1200 South Pine Island Read P.O. Dox NOT acceptable				်
	Plantation, Florida	33324	·	=	1.13
The street address of its registered office as changed will be identical.	and the street ad	dress of the business office	of its registered agent,	AM 10: 3	FLOR
Such change was authorized by resolution authorized by the board, or the corporation	n thily adopted by on has been notifi	y its board of directors or b led in writing of the change	y an officer so	85	ĐΑ
Signification of the officer of director	<u></u>	Ann T. Williaman, Assistant S	•		
hereby accept the appointment as regis- further agree to comply with the provis- erformere, of my chiles, and I am faul gent. Or, if this document is being filed ereby confirm that the corporation has	tered agent and a lons of all statute. lur with and acce merely to reflect been notified in w				
By: Signature of Registered Agent	-	12/10/1	14		
f signing on behalf of an entity: Lisa Shule OV, P' Typed or Priested Name					
Typical or Palested Name					

* * * FILING PEE: \$35.60 * * *

MAKE CHECKS PAYABLE TO FLURIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)