

F05000000053

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

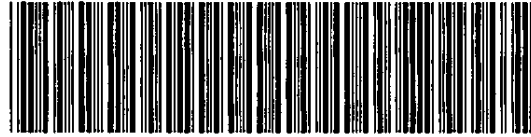
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 APR 15 AM 9:19

RA/RO/CHS
@ 4.16.13

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Systems Engineering Associates Corporation
Name of Corporation

DOCUMENT NUMBER: F05000000053

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michelle Cadorette, Paralegal

Name of Contact Person

Duffy & Sweeney, LTD.

Firm/Company

One Financial Plaza, Suite 1800

Address

Providence, RI 02903

City/State and Zip Code

kfinn@seacorp.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michelle Cadorette

Name of Contact Person

at (401) 455-0700

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 29, 2013

MICHELLE CADORETTA
DUFFY & SWEENEY, LTD.
ONE FINANCIAL PLAZA - STE. 1800
PROVIDENCE, RI 02903

SUBJECT: SYSTEMS ENGINEERING ASSOCIATES CORPORATION
Ref. Number: F05000000053

We have received your document for SYSTEMS ENGINEERING ASSOCIATES CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The capacity of the person signing the document must be typed or printed beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 913A00007479

RECEIVED
13 APR 15 AM 8:17
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

1. The name of the corporation: Systems Engineering Associates Corporation
2. The principal office address: 62 Johnnycake Hill Road, Middletown, RI 02842
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 1/4/05 Document number: F05000000053

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)

C T CORPORATION SYSTEM

1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 US

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

NRAI Services, Inc.

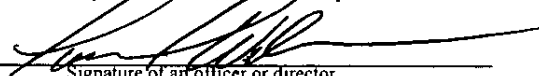
515 East Park Avenue

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.




Signature of an officer or director

Lawrence Willner, 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.



Signature of Registered Agent

April 9, 2013

Date

If signing on behalf of an entity:

Tinieha Clark, Asst. Secretary

Typed or Printed Name

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 APR 15 PM 9:19