F0500000 2697

| (Re | equestor's Name) | |
|---|------------------------|--------------|
| , (A | ddress) | |
| (Ad | ddress) | ······ |
| (C) | ity/State/Zip/Phone #) | |
| PICK-UP | WAIT | MAIL |
| (B | usiness Entity Name) | |
| (D | ocument Number) | |
| Certified Copies | Certificates of | Status |
| Special Instructions to Filing Officer: | | |
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Office Use Only



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SECRETARY OF STATE
SAL AHASSEE. FLORIO

PA Change 1/30/19



National Registered Agents, Inc. 11600 College Boulevard Suite 210 Overland Park, KS 66210 800.550.6724 Fax 913.851.0713

January 12, 2009

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: AROMASYS, INC.

Change of Registered Office and Registered Agent

Dear Sir/Madam,

For the purposes of changing the registered office and registered agent of the above captioned AROMASYS, INC., please find enclosed, in duplicate, a Statement of Change of Registered Office or Registered Agent accompanied by our check in the amount of Amount of \$35.00.

Please proceed with the filing of the enclosed, returning official receipts and evidence in the enclosed envelope.

Thank you in advance for your cooperation in this matter.

Sincerely,

Matt Thompson

National Registered Agents, Inc.

Enclosure - Check

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

| statement of cha | nge is submitted for a corporation | 17.0502, 607.1508, or 617.1508, Florida Statutes organized under the laws of the State of | <u> </u> |
|--|--|--|---|
| in order | r to change its registered office or | registered agent, or both, in the State of Florida. | |
| 1. The name of the corporation: | | Aromasys, Inc. | |
| 2. The principal | office address: 11490 Hudson E | Blvd. N, #14, Lake Elmo, MN 55042 | |
| <u> </u> | | | |
| 3. The mailing a | ddress (if different): | | |
| 4. Date of incorp | poration/qualification: 05/04/2005 | Document number: F0500000 | 2697 |
| 5. The name and | | tered agent and registered office on file with the | |
| | Environmental Electron | nic Projects, Inc. | |
| | 111 Corporation Way, | Suite B | 9 |
| | Venice, FL 34285 | TO RE | 09 JAN 16 |
| 6. The name and (if changed): | street address of the new registere | ed agent (if changed) and /or registered offices R | 2 11 |
| . . | NRAI Services, Inc. | Orive, Suite 4 | ED III ISH |
| • | 2731 Executive Park D | Orive, Suite 4 | Ä |
| | (P.O. Box NOT ac Weston, FL 33331 | exeptable) | |
| | | | |
| The street addre | ess of its registered office and the be identical. | street address of the business office of its regis | tered agent, |
| Such change was | as authorized by resolution duly a ne board, or the corporation has b | adopted by its board of directors or by an office seen notified in writing of the change. | r so |
| <u>hllly</u> | are off an officer or directory | EIEEN KENNEY (Printed or typed name and title) | JP |
| I further agree to of my duties, and document is being corporation has | to comply with the provisions of a d I am familiar with and accept to glied merely to reflect a chang been notified in writing of this c | gent and agree to act in this capacity. all statutes relative to the proper and complete the obligation of my position as registered agen the in the registered office address, I hereby con thange. | performance nt. Or, if this firm that the |
| by: Char | gnature of Registered Agent) | January 9, 2009 | |
| If signing on be | half of an entity: | | |
| Christian I | Eubanks, Assistant Secretary | | |
| | yped or Printed Name) | - | |

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