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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I2000000195 : (850)521-1000 Phone : (850)558-1515 Fax Number

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

Email Address:

REGISTERED AGENT CHANGE PURVIS SYSTEMS INCORPORATED

Certificate of Status	0
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Estimated Charge	\$35.00

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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 New York in order to change its registered office or registered agent, or both, in the State of Florida.	 :
1. The name of the corporation: PURVIS SYSTEMS INCORPORATED	
2. The principal office address:	
5918 Magnolia Beach Road, Unit B, Panama City, FL 32408	
3. The mailing address (if different): 1272 W. Main Rd., Middletown, RI 02842	00
4. Date of incorporation/qualification: 05/02/2008 Document number: F08000002010	੍ਰ 🖺
7点3	# 4 P
CT Corporation System	
1200 S. Pine Island Rd.	3. 46 34. 6
Plantation, FL 33324	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Corporation Service Company	,
1201 Hays Street	
(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 as changed will be identical.	agent,
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 sa-efficient) John T. Desposito (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 perfor of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or document is being filled merely to reflect a change in the registered office address, I hereby confirm to corporation has been notified in writing of this change. Corporation Service Company	mance , if this rat the
By: (0-1-Z-010) (Date)	
If signing on behalf of an entity:	
Sylvia Queppet, Asst. Vice President	
(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 (8/05)