Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)205-8842 Phone Fax Number

: (850)878-5368

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

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## REGISTERED AGENT CHANGE TERRA SPECTRUM TECHNOLOGIES, INC.

Certificate of Status	0
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Page Count	03
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

TERRA SPECTRUM TECHNOLOGIES, INC. SUBJECT:				
Name of Corporation				
DOCUMENT NUMBER:				
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:				
Name of Contact Person				
Firm/Company .				
Address				
City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Name of Contact Person at ( )  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

CR2E045 (03/12)

06 - 85/2000013 Mahase Missian Palina

12/18/2015 10:40:30 AM From: To: 8506176380( 3/3 )

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

· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Iowa		
		registered agent, or both, in the State of Florida.		
1. The name of	the corporation: TERRA SPECTRUM office address:	M TECHNOLOGIES, INC.		
	office address:  DAVE WEST DES MOINES, IA 50			
_	address (if different):			
4. Date of incorporation/qualification: 09/23/2008 Document number: F08000004151				
	i street address of the current regist	ered agent and registered office on file with the esigned)		
	NRAI SERVICES, INC			
	1200 South Pine Island Road			
	Plantation, FL 33324	···		
6. The name and street address of the new registered agent (if changed) and /or registered office.				
	C T Corporation System	SSEE OF LEE		
	c/o C T Corporation System, 1200 South Pine Island Road			
	P.O. Box NOT acceptable  Plantation, Florida 33324			
The street address changed will	ess of its registered office and the s	street address of the business office of its registered agent,		
		lopted by its board of directors or by an officer so en notified in writing of the change.		
April Wittenwyler		April Wittenwyler, Vice President  Printed or typed name and title		
performance of agent. Or, if the	my duties, and I am tamiliar with	ent and agree to act in this capacity. Il statutes relative to the proper and complete and accept the obligation of my position as registered o reflect a change in the registered office address, I		
By: C T Corporation System  By: Carifar Vincant.  Øignature of Registered Agent		12/10/2015		
Bignardie of Registered Agent		Date		
Ų J	half of an entity:			
Jenifer Vincent	yped 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 (03/12)