

F09000001035

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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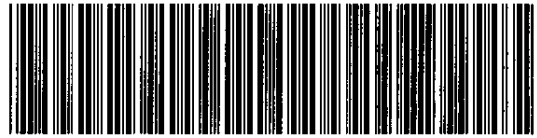
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A.

TB

MAR - 8 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Delta R Detection
(Name of Corporation)

DOCUMENT NUMBER: N/A

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:

Thierry DUBROCA
(Name of Contact Person)

Delta R Detection
(Firm/Company)

2330 SW Williston Rd #825
(Address)

Jacksonville, FL 32608
(City/State and Zip Code)

For further information concerning this matter, please call:

Thierry DUBROCA at (352) 262 7778
(Name of Contact Person) (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

February 19, 2010

THIERRY DUBROCA
DELTA R DETECTION, INC.
2330 SW WILLISTON RD #825
GAINESVILLE, FL 32608

SUBJECT: DELTA R DETECTION, INC.
Ref. Number: F09000001035

We have received your document for DELTA R DETECTION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A change of registered agent form cannot be used solely to make a change in the principal office address of the corporation. This change can be sent to us by using this email address: corpaddresschange@dos.state.fl.us

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 110A00004139

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

1. The name of the corporation: ~~DETA~~ DELTA R DETECTION, INC.
2. The principal office address: 2330 SW Williston Rd #825
Gainesville, FL 32608
3. The mailing address (if different): _____
4. Date of incorporation/qualification: March 2009 Document number: N/A
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)

Corporation Service Company
1201 Hays St.
Tallahassee, FL 32301

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

Thierry DUBROCA
2330 SW Williston Rd #825
Gainesville, FL 32608

P.O. Box NOT acceptable

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 MAR -5 AM 10:45

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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]
Signature of an officer or director

THIERRY DUBROCA
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]
Signature of Registered Agent

Feb 28th 2010
Date

If signing on behalf of an entity:

Thierry DUBROCA
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