

(Requestor's Name)				
(Address)				
(Address)				
(100.000)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(See Moss Edition France)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special instructions to Filing Officer.				

Office Use Only



400269330244

02/11/15--01013--001 **35.00

NEW PROPERTY IS

During

FEB 17 2015

R. William



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Michael Rosenberg mrosenbe@cscinfo.com

Date: February 9, 2015

Order#: 486267-015

Re: A-T SOLUTIONS, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Michael Rosenberg c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	nge is submitted for a corporation	7.0502, 607.1508, or 617.1508, Florida organized under the laws of the State of registered agent, or both, in the State of	Virginia
1. The name of t	he corporation: A-T SOLUTIONS,	INC.	
2. The principal Niceville, FL	office address: 4400 Hwy 20 East,	Suite 507	
	ddress (if different): 10304 Spotsy burg, VA 22408	Ivania Ave, Ste 200	1
4. Date of incorp	poration/qualification: 09/27/2012	Document number: F12000	003987
	street address of the current regist tment of State: (If resigned, enter r	ered agent and registered office on file wesigned)	vith the
	Robert Hague		_
	4400 Hwy 20 East, Suite 507		
	Niceville, FL 32578		를 (하
6. The name and (if changed):	I street address of the new registere	ed agent (if changed) and /or registered o	
	Corporation Service Company		
	1201 Hays Street		
	P.O. Bo Tallahassee	ox NOT acceptable FL 32301	$\overline{\omega}$
			-
The street addre as changed will	ess of its registered office and the second the second the second the second transfer and t	street address of the business office of i	ts registered agent,
Such change wa authorized by th	s authorized by resolution duly ac e board, or the corporation has be	dopted by its board of directors or by an een notified in writing of the change.	officer so
1		Dona Priebe	Vice President
I hereby accept I further agree to performance of agent. Or, if the hereby confirm	to comply with the provisions of a my duties, and I am familiar with	Printed or typed name and to ent and agree to act in this capacity. Il statutes relative to the proper and cot and accept the obligation of my positio to reflect a change in the registered offi ified in writing of this change.	mplete n as registered
By: Sylvin	nature of Registered Agent	02/09/2015	
_	half of an entity:		
Sylvia Queppet	, Assistant Vice President		
T,	vped or Printed Name		

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