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SES ADVISORS INC

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## **COVER LETTER**

TO: Amendment Division of	Section Corporations		
SUBJECT: SES	Advisors, Inc.		
	Name of Corp	poration	
DOCUMENT NUM	<sub>пвек:</sub> F12000004619	<u> </u>	
The enclosed Statem	ent of Change of Registered Office/A	Agent and fee are submitted for filing.	
Please return all corr	espondence concerning this matter to	the following:	
	onk-series series was warmed to	· · · · · · · · · · · · · · · · · · ·	
	,		
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For further informati	on concerning this matter, please call	:	
		at (	
Name	of Contact Person	Area Code & Daytime Telephone Num	iber
Enclosed is a \$35.00	check made payable to the Departme	ent 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	

## 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: SES Advisors, Inc.	
2. The principal office address: 10959 Countryway Boulevard, Tampa, FL 33626	
3. The mailing address (if different):	_
4. Date of incorporation/qualification: November 14, 2012 Document number: F12000004619	
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)	
Brian Wurpts	
10959 Countryway Boulevard	- a - a
Tampa FL 33626	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	1,
NRAI Services, Inc.	
1200 South Pine Island Road	
P.O. Box NOT acceptable Plantation, FL 33324	
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.	
James G. Steiker, President	
Signature of an officer or director 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.	
Willeum J. Allawh  Signature of Registered Agent  Date	
If signing on behalf of an entity:	
William L. De Nagoli 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 (03/12)