

F13000002788

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

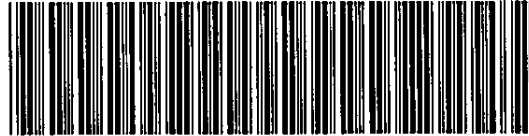
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Software Management Services, Inc.

Name of Corporation

**DOCUMENT NUMBER:** F13000002788

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:

Missy Kranz

Name of Contact Person

Software Management Services, Inc.

Firm/Company

PO Box 23266

Address

Minneapolis, MN 55423

City/State and Zip Code

missy.kranz@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Missy Kranz

Name of Contact Person

at ( 612 ) 532-2595

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

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

1. The name of the corporation: Software Management Services Inc.  
2. The principal office address: 7800 Metro Parkway, Suite 300, Minneapolis, MN 55425  
3. The mailing address (if different): PO Box 23266, Minneapolis, MN 55423

4. Date of incorporation/qualification: 06/24/2013 Document number: F13000002788

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)

OLAH, D. BRADLY  
525 - 17Th Avenue South  
Naples, THE ABOVE N 34102

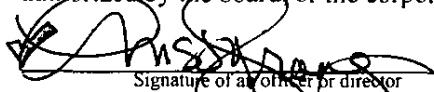
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

InCorp Services, Inc.  
17888 67th Court North  
Loxahatchee, FL 33470

P.O. Box NOT acceptable

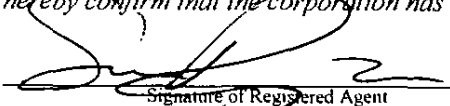
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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 of an officer or director

Nessy Kranz, Controller  
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 of Registered Agent

October 21, 2015

Date

If signing on behalf of an entity:

Sara Brautigam on behalf of Incorp Services, Inc.  
Typed or Printed Name

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