

**F15000000753**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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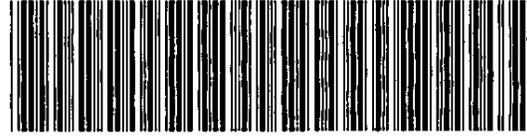
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** HEUROBOTICS CORPORATION

Name of Corporation

**DOCUMENT NUMBER:** F15000000753

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:

Kerry Symolon Karl

Name of Contact Person

Heurobotics Corporation

Firm/Company

1585 Aviation Center Parkway

Address

Daytona Beach, FL 32114

City/State and Zip Code

kerry@heurobotics.com

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

For further information concerning this matter, please call:

Kerry Symolon Karl

Name of Contact Person

at ( 407 ) 967-8723

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

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RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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

1. The name of the corporation: Heurobotics Corporation
2. The principal office address: 1585 Aviation Center Parkway  
Daytona Beach, FL 32114
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 09/05/2014 Document number: F15000000753
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)

Kerry Symolon Karl  
140 Gala Cir  
Daytona Beach, FL 32124

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

Kerry Symolon Karl  
1585 Aviation Center Parkway  
P.O. Box NOT acceptable  
Daytona Beach, FL 32114

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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.

Kerry Symolon Karl  
Signature of an officer or director

Kerry Symolon Karl, CEO  
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.*

Kerry Symolon Karl  
Signature of Registered Agent

11/25/2015  
Date

If signing on behalf of an entity:

Kerry Symolon Karl  
Typed or Printed Name

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