416000002711

(Requestor's Name)					
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(Address)					
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(i.d.i.oo)					
(0)-10-1-17-17					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
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Special Instructions to Filing Officer:					
,					

Office Use Only



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01/10/17--01012--007 **35.00



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: January 6, 2017

Order#: 451483-010

Re: IMMERSAVIEW, 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: Ami Casper

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

42 - - - -

statement of cha	•	ration organized under the la	517.1508, Florida Statutes, this was of the State of Delaware oth, in the State of Florida.	
1. The name of	the corporation: IMMERSAV	IEW, INC.		
2. The principal	office address: 3251 Progre	ss Drive, Orlando, FL 3282	6	
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 06/15	5/2016 Document	number: F16000002711	200
	I street address of the current rtment of State: (If resigned, e		red office on file with the	星
	Christopher A. Walker, Esq	-		(A) (O)
	800 West Monroe Street		ĭ	AGA !
r	Jacksonville, FL 32202		***************************************	767
6. The name and (if changed):	I street address of the new reg	gistered agent (if changed) ar	nd /or registered office	.51.
	Corporation Service Compa	nny		
	1201 Hays Street			
	Tallahaana	P.O. Box NOT acceptable	20204	
	Tallahassee	FL	32301	
The street address changed will	ess of its registered office and be identical.	d the street address of the bu	usiness office of its registered a	agent,
Such change wa authorized by th	as authorized by resolution do ne board, or the corporation h	uly adopted by its board of coas been notified in writing o	directors or by an officer so of the change.	
Signatu	re of an officer or director	. Joe Prin	Doubrava ed or typed hame and title	<u>C</u> F0
Iffurther agree is performance of agent. Or, if this hereby confirm	the appointment as registere to comply with the provisions my duties, and I am familiar is document is being filed me that the corporation has been Service Company	s of all statutes relative to the with and accept the obligat rely to reflect a change in t	ie proper and complete ion of my position as registere he registered office address. I	d
By: Sylvin	nature of Registered Agent	01/06/2		
	half of an entity:		Date	
	, Asst. Vice President			
	ped or Printed Name	_		

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