

F18000000952

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**DATE: 12/28/18**

**NAME: INTERACTIVE ACCESSIBILITY INC**

**TYPE OF FILING: CHANGE OF AGENT**

**COST: 35.00**

**RETURN: PLAIN COPY PLEASE**

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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**

*Abbie Hodge*

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Interactive Accessibility, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** F180000000952

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:

Rickeda Jackson  
Name of Contact Person

Intertrust Corporate Services Delaware Ltd.  
Firm/Company

200 Bellevue Parkway, Suite 210  
Address

Wilmington, DE 19809  
City/State and Zip Code

intertrustus@interrustgroup.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rickeda Jackson at ( 302 ) 798-5852  
Name of Contact Person 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 Massachusetts in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Interactive Accessibility, Inc.
2. The principal office address: 17757 US Highway 19 N, Suite 560  
Clearwater, FL 33764-6570
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 02/23/2018 Document number: F180000000952
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)

Incorp Services, Inc.

17888 67th Court North

Loxahatchee, FL 33470

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

Florida Filing & Search Services Inc.

155 Office Plaza Dr., Suit A

P.O. Box NOT acceptable

Tallahassee, FL 32301

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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.

Rick Simpson  
Signature of an officer or director

Rick Simpson, CFO.  
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.

Abbie Hodge  
Signature of Registered Agent

12/28/18  
Date

If signing on behalf of an entity:

ABBIE HODGE  
Typed or Printed Name

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