

9/18/2019

Division of Corporations

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6380

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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TALLAHASSEE, FL

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**REGISTERED AGENT CHANGE
ALTOPHASE, INC.**

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FAX COVER SHEET

TO	
COMPANY	
FAX NUMBER	18506176380
FROM	Ranae McGraw
DATE	2019-09-18 07:19:30 CST
RE	ALTOPHASE, INC. - 12162776

COVER MESSAGE

Thank You,

Aubrey Weibel
Fulfillment Associate
CT Corporation

Team (614) 280-3338
GlobalFulfillmentTeam@wolterskluwer.com

**Wolters Kluwer**

1209 N Orange Street
Wilmington, DE 19801
www.wolterskluwer.com

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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: ALTOPIHASE, INC.
2. The principal office address: 12975 Collier Blvd, Suite 109, Naples, FL 34116
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 06/19/2019 Document number: F19000003042
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)

WALKER, AUDRINE M

12975 COLLIER BLVD, STE 109

NAPLES, FL 34116
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road

Plantation, Florida 33324

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.

Natalie Pickens Natalie Pickens-Authorized Person
(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.

By: C T Corporation System 09/09/2019
Sarah Reville Signature of Registered Agent Date

If signing on behalf of an entity:

Sarah Reville-Asst. Secretary

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

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