## F200000000709

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## **COVER LETTER**

TO:

Amendment Section Division of Corporations

Name of Corporation		
DOCUMENT NUMBER: F20000000709	· · · · · · · · · · · · · · · · · · ·	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning th	nis matter to the following:	
Ann E Osborne		
Name of Contact Person		
Technical Systems Integration NJ, Inc.		
Firm/Company		
2740 Bayshore Dr. Unit 7		
Address		
Naples, FL 34112		
City/State and Zip Code		
aeo@fuc-corp.com		
E-mail address: (to be used for future annu	al report notification)	
For further information concerning this matter	, please call:	
Ann E Osborne	at (732 ) 789-6425  Area Code & Daytime Telephone Nu	
Name of Contact Person	Area Code & Daytime Telephone Nur	

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E045 (04/13)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a corporati	617.0502, 607.1508, or 617.1508, Florida Statutes, this on organized under the laws of the State of New Jersey or registered agent, or both, in the State of Florida.
<del></del>	the corporation: Technical System	<del>-</del>
2. The principa Naples, FL 341	l office address: 2740 Bayshore D	r. Unit 7
3. The mailing	address (if different):	
4. Date of incor	poration/qualification: 02/06/202	20 Document number: F20000000709
	d street address of the current regardment of State: (If resigned, enter	gistered agent and registered office on file with the er resigned)
	Ann E Osborne	
	3461 Lakeview Dr	ZIR4 SEP 11
	Naples, FL 34112	平
6. The name an (if changed):		ered agent (if changed) and /or registered office P. C. F. C. P. C. F. C. P. C. F. C. P. C
	4578 Arboretum Cir, Unit 103	
	Naples, FL 34112	P.O. Box NOT acceptable
The street addr as changed wil	ess of its registered office and t	he street address of the business office of its registered agent.
Such change wauthorized by t	as authorized by resolution duly he board, or the corporation has	adopted by its board of directors or by an officer so been notified in writing of the change.
Signation &	Colorno ure of an officer or director	Ann E Osborne, President  Printed or typed name and title
I hereby accep I further agree of my duties, a document is be	t the appaintment as reaistered	agent and agree to act in this capacity.  f all statutes relative to the proper and complete performance  t the obligation of my position as registered agent. Or, if this  nge in the registered office address, I hereby confirm that the
ann.	E Or Borne	09/05/2024
Si	gnature of Registered Agent	Date
If signing on be	ehalf of an entity:	
	ms Integration NJ, Inc.	
•	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