

F 210000003232

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

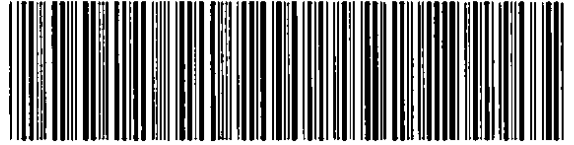
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

PLEASE USE FUNDS FROM ACCT: 120210000160 AMOUNT: \$35.00

Authorized Signature: 

Alien Technologies Inc.

F21000003232

Business Name

Document Number

☐ **Certified copy of complete file**

☐ **Pick up time** _____

☐ **Certificate of Status**

☐ **Will wait**

NEW FILINGS

☐ **Profit**

☐ **Not for Profit**

☐ **Limited Liability**

☐ **Domestication**

☐ **CONVERSION**

☐ **CORP**

AMMENDMENTS

☒ **Amendment**

☐ **Resignation of R.A.**

Officer/Director

☐ **Change of Registered Agent**

☐ **Dissolution/Withdrawal**

☐ **Merger**

☐ **Correction**

OTHER FILINGS

☐ **Annual Report**

☐ **Fictitious Name**

☐ **APOSTIL ()**

Country

REGISTRATION/QUALIFICATIONS

☐ **Foreign filing**

☐ **Limited Partnership**

☐ **Reinstatement**

☐ **Other**

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Alien Technologies Inc
Name of Corporation

DOCUMENT NUMBER: F21000003232

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:

Azadeh Mackay

Name of Contact Person

Alien Technologies Inc

Firm/Company

2001 NW 64th St Suite 100

Address

Fort Lauderdale, Florida 33309

City/State and Zip Code

amackay@alientechnologiesinc.com

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

For further information concerning this matter, please call:

Azadeh Mackay

Name of Contact Person

at (949)

500 9609

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

1. The name of the corporation: Alien Technologies Inc
2. The principal office address: 2001 NW 64th St Suite 100, Fort Lauderdale, FL 33309
3. The mailing address (if different): as same as principle address
4. Date of incorporation/qualification: 08/20/07 Document number: F21000003232
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)

2100 NW 64th St Suite 100, Fort Lauderdale, FL 33309

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

2001 NW 64th St Suite 100, Fort Lauderdale, FL 33309

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.

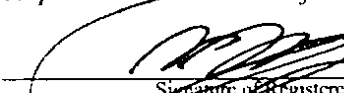


Signature of an officer or director

Azadeh Mackay

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.



Signature of Registered Agent

10/28/21

Date

If signing on behalf of an entity:

Azadeh Mackay

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

CR2E045 (04/13)