

F220000000516

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

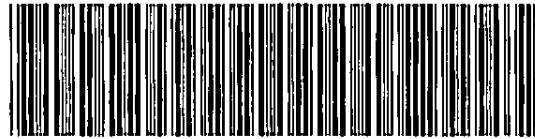
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

611

Office Use Only



600381152536

Amend

00/17/22--01/17--003 **35.00

A. RAMSEY
MAR 10 2022

2022 FEB 17 PM 12 38
FILED
RECEIVED BY STATE

*They are
just changing spelling
of RA name - they
are not a new RA*



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 24, 2022

XIMENA OSPINA
801 2ND AVE
15TH FLOOR
NEW YORK, NY 10017 US

SUBJECT: MGE UNIFIED TECHNOLOGIES CORP.
Ref. Number: F22000000516

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Jasmine N Horne
Regulatory Specialist II

Letter Number: 422A00004638

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F22000000516

(Document number of corporation (if known))

1. MGE Unified Technologies Corp.

(Name of corporation as it appears on the records of the Department of State)

2. New York

(Incorporated under laws of)

3. 01/24/2022

(Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? _____

5. _____
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent Licensasure LLC

1400 Village SQ BLVD #3-S5007

(Florida street address)

New Registered Office Address: Tallahassee

(City)

Florida 32312

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

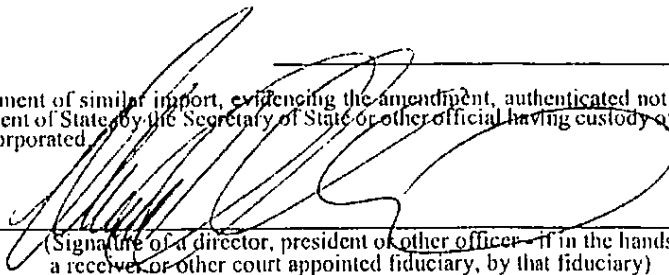
Signature of New Registered Agent, if changing

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2022 FEB 17 PM 3:38
SEC. OF STATE
TALLAHASSEE, FL

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Secretary <input checked="" type="checkbox"/>	Demetrios Gianniris	40 Farnham Square	<input type="checkbox"/> Add
		Parlin, NJ 08859	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.



(Signature of a director, president or other officer, if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Michael Gerazounis, P.E.

(Typed or printed name of person signing)

Principal

(Title of person signing)

FILING FEE \$35.00