## F94000005525

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TALLAHASSEE, FLORIDE

10 pt 1



ACCOUNT NO. : I2000000195

REFERENCE :

942725

7851261

AUTHORIZATION

COST LIMIT

ORDER DATE: October 12, 2011

ORDER TIME : 11:04 AM

ORDER NO. : 942725-188

CUSTOMER NO: 7851261

## CHANGE OF AGENT

NAME: METROPLEX CONTROL SYSTEMS,

INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS:

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

statement of ch	e provisions of sections 607.0502, 617.050. ange is submitted for a corporation organi er to change its registered office or registe		_
1. The name of	the corporation: METROPLEX CONT	ROL SYSTEMS, INC.	
2. The principal	l office address:		
12903 Del	ivery Drive, San Antonio, TX 78247		· · · · · · · · · · · · · · · · · · ·
3. The mailing	address (if different):		
4. Date of incor	poration/qualification: 10/25/1994	Document number:F94000005525	
	d street address of the current registered ag rtment of State:	gent and registered office on file with the	
	National Corporate Research, Ltd.,	Inc.	un t
	515 East Park Avenue		•
	Tallahassee, FL 32301	SECRE NO.	T
6. The name and (if changed):	d street address of the new registered agen	t (if changed) and /or registered office	12
	Corporation Service Company	For w	}
	1201 Hays Street	RIGHTE	30
	(P.O. Box NOT acceptable)		
	Tallahassee, FL 32301		
The street addrass changed will	ess of its registered office and the street a l be identical.	address of the business office of its registered agen	it,
Such change wauthorized by the	as authorized by resolution duly adopted he board, or the corporation has been not	by its board of directors or by an officer so ified in writing of the change.	
Maria	ure of an officer or director)	Maureen Cathell, Vice President (Printed or typed name and title)	-
I hereby/accept I further agree of my duties, ar document is bet corporation ha.	t the appointment as registered agent and	•••	ce iis ie
By:	Adle	10/05/2011	_
. (Si	gnature of Registered Agent)	(Date)	
If signing on be	ehalf of an entity:		
	Dawson, Asst. Vice President		
(	Typed or Printed Name)		

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