F97000004624

(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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TALLAHASSEE, FLORIDA

RAchange
10-9-09
Dc

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Industrial Wireless Technologies, Inc.
Name of Corporation

DOCUMENT NUMBER: F97000004624

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:

Nichole Brown
Name of Contact Person

Corporate Filing Solutions, LLC
Firm/Company

PO Box 1348
Address

Boston, MA 02117
City/State and Zip Code

nbrown@cfs247.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nichole Brown at (888) 237-3410
Name of Contact Person — 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

1. The name of the corporation: Industrial Wireless Technologies, Inc.

2. The principal office address: 40 Lone Street, Marshfield, MA 02050

3. The mailing address (if different): ______

4. Date of incorporation/qualification: 09/03/1997 Document number: F97000004624

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)

CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

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

Corporate Filing Solutions, LLC
7630 Lago Del Mar Drive, Suite 10
P.O. Box NOT acceptable
Boca Raton, FL 33433

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TALLAHASSEE FLORIDA
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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

Thomas B. Rosedale, Secretary
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.

Corporate Filing Solutions, LLC
By: ______, Manager
Signature of Registered Agent

October 2, 2009
Date

If signing on behalf of an entity:

Thomas B. Rosedale
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 (8/05)