Division of Corporations Electronic Filing Cover Sheet

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To:

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: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Rmail	Address:		

## REGISTERED AGENT CHANGE CHUA MYCROSCHOOL OF INTEGRATED ACADEMICS AND

TECH

Certificate of Status	0
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MAY 2 8 2013

## **COVER LETTER**

TO:		nent Section of Corporations			
OHD	JECT: ALA	CHUA MYCROSCHOOL OF INTEGRA	TED ACADE	MICS AND Technologies,	Inc.
SOF	JEC1:	Name of Co	rporation	<del></del>	
DOC	UMENT N	N10000009045			
		atement of Change of Registered Office	/Agent and fo	ee are submitted for filing.	
		correspondence concerning this matter			
		Mike Hadjiaghai			
		Name of Con	tact Person		
		MYcroSchool Gainesville			
		Firm/Co	трапу		
		2611 Temple Heights Drive, Suite A			
		Addr	¢33		
		Occanside, CA 92056			
		City/State an	d Zip Code		
		Mike.Hadjiaghai@sintech.org			
		E-mail address: (to be used for fi	iture annual	report notification)	
For f	urther infor	mation concerning this matter, please c	all;		
Mike	: Hadjioghai		760 at (	631-3400	
	<del></del>	Name of Contact Person	Area C	ode & Daytime Telephone Numb	er -
Encl	osed is a \$3	5.00 check made payable to the Dopart	ment of State		
		Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		eet Address: nendment Section vision of Corporations fton Building 61 Executive Center Circle	
			Ta	llahassee, FL 32301	

CR2E045 (03/12)

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

statement of ci	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, hange is submitted for a corporation organized under the laws of the State of fer to change its registered office or registered agent, or boilt, in the State of Florida.	, this	
	File corporation: ALACHUA MYCROSCHOOL OF INTEGRATED ACADEMICS AND	Technol	ogies, Inc.
2. The principa	al office address: 2209 NW 13TH STREET B GAINESVILLE, FL 32609		
3. The mailing	address (If different); 2611 TEMPLE HEIGHTS DRIVE A OCHANSIDE, CA 92056		
4. Date of inco	progration/qualification: 09/24/2010 Document number: N10000009045	\$ <sup>2</sup> -6>	2013
5. The name at	nd street address of the current registered agent and registered office on file with the artiment of State: (If resigned, enter resigned)		HAY 2
	DIETZEN, LEONARD JIII	SS	Ø!
	215 SOUTH MONROB STREET, SUITE 130	(1) es	PH
	TALLAHASSBH, PL 32301-7721	アの	2:3
6. The name a (If changed)	nd street address of the new registered agent (if changed) and for registered office		å ø
	C T Corporation System		,
	c/o C T Corporation System, 1200 South Pine Island Road		
	P.O. Box NUT acceptable		•
	Plantation, Plorida 33324		
The street add as changed wi	ress of its registered office and the street address of the business office of its registration.	ered agen	it,
	ver authorized by resolution duly adopted by its board of directors or by an officer the board of the change.  In EVELLY F. ZAGAISK  was class enjected director.		
[   jeraby accest   further agree performance capen]. Or, if the hereby confirmance confir	of the appointment as registered agont and agree to act in this capacity, is to conficult with the provisions of all staintes relative to the proper and complete of my dulles, and I am familiar with and accept the obligation of my position as reging document is being filed merely to reflect a change in the registered office address that the corporation has been notified in writing of this change.	istered 158, Î	
N. W. West	Corporation System 5/23/2013		
If signing on b	pohalf of an cutity:		
	* * * FILING FBE; \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)