

PO1000032374

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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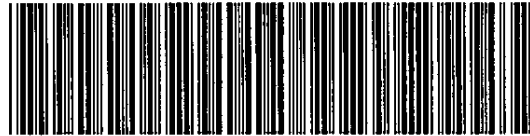
(Business Entity Name)

(Document Number)

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November 2, 2015

**VIA U.S. MAIL**

Florida Department of State Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

Re: Bit-Wizards Technology Solutions, Inc.

To Whom It May Concern:

Enclosed please find Bit-Wizards Technology Solutions, Inc.'s Statement of Change of Registered Office or Registered Agent, along with the required \$35.00 fee.

Should you have any questions, or require any additional paperwork, please contact our office.

Sincerely,

KEEFE, ANCHORS & GORDON, P.A.

A handwritten signature in black ink, appearing to read 'Mackenzie Baughn', written over the printed name.

Mackenzie Baughn,  
Florida Registered Paralegal  
[mbaughn@kaglawfirm.com](mailto:mbaughn@kaglawfirm.com)

Enclosures as stated.

[kaglawfirm.com](http://kaglawfirm.com)

850.863.1974

850.863.1591 fax

2113 Lewis Turner Blvd, Ste 100  
Fort Walton Beach, FL 32547

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Bit-Wizards Information Technology Solutions, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P01000032374

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:

Michelle Anchors

Name of Contact Person

Keefe, Anchors & Gordon, P.A.

Firm/Company

2113 Lewis Turner Blvd., Suite 100

Address

Fort Walton Beach, FL 32547

City/State and Zip Code

manchors@kaglawfirm.com

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

For further information concerning this matter, please call:

Michelle Anchors

Name of Contact Person

at ( 850 ) 863-1974

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

1. The name of the corporation: Bit-Wizards Information Technology Solutions, Inc.  
2. The principal office address: 13 Memorial Parkway SW, Fort Walton Beach, FL 32548

3. The mailing address (if different): P.O. Box 937, Fort Walton Beach, FL 32549

4. Date of incorporation/qualification: 03/26/2001 Document number: P01000032374

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)

Elizabeth LaFollette, Pleat & Perry, P.A.

4477 Legendary Drive, Suite 202

Destin, FL 32541

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

Michelle Anchors, Keefe Anchors & Gordon, P.A.

2113 Lewis Turner Blvd., Suite 100

P.O. Box NOT acceptable

Fort Walton Beach, FL 32547

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.

Louis J. Erickson  
Signature of an officer or director

Louis Erickson, COO

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.*

Michelle Anchors  
Signature of Registered Agent

11/2/15

Date

If signing on behalf of an entity:

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 (03/12)