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Division of Corporations  
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REGISTERED AGENT CHANGE  
ATEX INC.

Certificate of Status	0
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# 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: ATEX INC.
2. The principal office address: 410 N Wickham Road Ste 100  
Melbourne FL 32935
3. The mailing address (if different): 410 N Wickham Road Suite 100  
Melbourne FL 32935
4. Date of incorporation/qualification: 7/30/2001 Document number: P01000075425
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)


NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE FL 32301 US

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

C T Corporation System  
1200 South Pine Island Road, Plantation, Florida 33324  
P.O. Box: NOT acceptable

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

Scott Roessler, President  
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.

  
Signature of Registered Agent

24th day of June, 2011  
Date

If signing on behalf of an entity:

Mark Williams, AVP  
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  
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