## P02000005290

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



400259254844

04/23/14--01006--010 \*\*35.00

SFCRENKY OF STATE

RARDICH 8
(104/30/14)

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

KNOWMENTUM, INC.

Name of Corporation

P02000005290

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:

RYAN ROOTH

Name of Contact Person

ROOTH LAW GROUP, P.A.

Firm/Company

4399 35TH STREET NORTH, SUITE 322

Address

ST. PETERSBURG, FL 33714

City/State and Zip Code

RROOTH@ROOTHLAWGROUP.COM

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

For further information concerning this matter, please call:

RYAN ROOTH

727 797-9600
Area Code & Daytimo Telephone Number

Name of Contact Person

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

-	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of FLORIDA	
	r to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the	the corporation: KNOWMENTUM, INC.	
2. The principal of	office address: 5405 CYPRESS CENTER DRIVE, SUITE 280	
TAMPA, I	FL 33609	
3. The mailing ac	address (if different):	
4. Date of incorp	poration/qualification: 1/16/2002 Document number: P0200005290	
	d street address of the current registered agent and registered office on file with the rement of State: (If resigned, enter resigned)	
_	BEACHT, GERALD	
<u>.</u>	3001 NORTH ROCKY POINT DRIVE EAST, SUITE 227	
	TAMPA, FL 33607	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office  ROOTH LAW GROUP, P.A.	
	ROOTH LAW GROUP, P.A.	ı
• -	4399 35TH STREET NORTH, SUITE 322	32 55 65
·	P.O. Box NOT acceptable ST. PETERSBURG, FL 33714	14 C 21
The street address as changed will	ess of its registered office and the street address of the business office of its registered agent be identical.	,
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
Signature	GERALD BEACHT, PT re of an officer or director  Printed or typed name and title	
i turther agree to	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.	
Sions	nature of Registered Agent  Date	
If signing on beh		
	SROUP, P.A., RYAN ROOTH  yped or Printed Name	

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