P02-0000 21798

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COVER LETTER

TO: Amendment Section **Division of Corporations** Exploritech, Inc. Name of Corporation P02000021798 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: Scott McCormish Name of Contact Person Exploritech, Inc. Firm/Company 648 8th Street North Naples, Florida 34102 City/State and Zip Code hello@exploritech.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Scott McCormish rea Code & Daytime 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

Pursuant to the	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, i	Florida Statı	ıtes, this	
•	ange is submitted for a corporation organized under the laws of the S			
in orde	er to change its registered office or registered agent, or both, in the S	state of Flori	da.	
1. The name of	the corporation: Exploritech, Inc.			
2 The principal	office address: 648 8th Street North, Naples, Florida 3	<u></u> 34102		
z. The principal	Torrice address.			
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 2/27/2002 Document number:	2020000 2	21798	
	d street address of the current registered agent and registered office ourtment of State: (If resigned, enter resigned)	n file with th	пе	
	Stephen L Kubala			
	13150 Whitehaven Lane - Unit 133			
	Fort Myers, Florida 34108		SICORE AUG)
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or regis	tered office	- <u>225</u>	
	Scott McCormish			
	648 8th Street North P.O. Box NOT acceptable		TIVE STATE) ³ nanyar ²
			2, 9	
	Naples, Florida 34102			
The street addre	ess of its registered office and the street address of the business off	ice of its reg	istered agen	t,
	as authorized by resolution duly adopted by its board of directors on the board, or the corporation has been notified in writing of the char			
but Me	Scott McCormish -		nt	
I hereby accept	the appointment as registered agent and agree to act in this capac to comply with the provisions of all statutes relative to the proper of my duties, and I am familiar with and accept the obligation of my his document is being filed merely to reflect a change in the register that the corporation has been notified in writing of this change.	rity. and complete	egistered dress, I	
Sat Min	nature of Registered Agent 7/29/2016 7/29/2016 Date		 	
If signing on be	chalf of an entity:			
Scott MC	Yped or Printed Name			

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