P05 000 131507

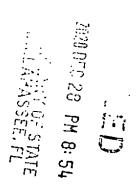
(Red	questor's Name)	
(Add	dress)	
(Add	dress)	_ .
(City	y/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	curnent Number)	· <u></u>
Certified Copies	_ Certificates	of Status
Special Instructions to I	Eiling Officer	
Special instructions to i	-ming Onicer.	

Office Use Only



800356833278

12/28/20--01020--026 **35.00



TEN US WILL

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Titan Wireless Communications Consultants, Inc. Name of Corporation
DOCUMENT NUMBER: P05000131507
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:
Mike Womer
Name of Contact Person
United Agent Services LLC
Firm/Company
221 N Broad St
Address .
Middletown, DE 19709
City/State and Zip Code
compliance@unitedagentservices.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Quinn McCreary at (302)894-7716 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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

in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: TITAN WIRELESS COMMUNICATIONS CONSULTANTS, INC.
2. The principal office address: 41936 COUNTY ROAD 452, LEESBURG, FL 34788
3. The maiting address (if different):
4. Date of incorporation/qualification: 09/23/2005 Document number: P05000131507
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)
SMALLBIZ AGENTS, LLC
75 N. WOODWARD AVE. #10000
TALLAHASSEE, FL 32313
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
United Agent Services LLC
9100 Conroy Windermere Rd #200-UAS P.O Box NOT acceptable
Windermere, FL 34786
The street address of its registered office and the street address of the business office of its registered age 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 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 performation of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if the 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 Registed Agent 12/20/20 Date
If signing on behalf of an entity:
Typo or Printed Name
Typy6 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