

PO5000 146350

Coladny Fass et al
(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☒ PICK-UP ☐ WAIT ☐ MAIL

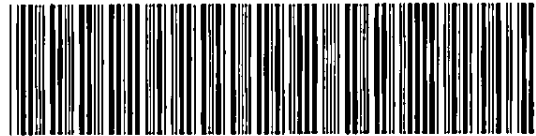
(Business Entity Name)

(Document Number)

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18 SEP 25 AM 9:02
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TALLAHASSEE, FLORIDA

09/26/18--01001--002 **35.00

SEP 26 2018
S. YOUNG

SEP 25 PM 3:04
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MAGLEV ENERGY, INC.

Name of Corporation

P05000146350

DOCUMENT NUMBER: _____

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:

MARIA A. ABATE, Esq.

Name of Contact Person

COLODNY FASS, PLLC

Firm/Company

1401 NW 136 AVENUE, SUITE 200

Address

SUNRISE, FL 33323

City/State and Zip Code

mabate@colodnyfass.com

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

For further information concerning this matter, please call:

Maria Abate

954

492-4010

Name of Contact Person

at (_____) _____

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: Maglev Energy, Inc.
2. The principal office address: 10550 72nd Street, Suite 507, Largo, FL 33777

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10/31/2005 Document number: P05000146350

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)

Daniel A. Harris

13644 West Hillsborough Avenue

Tampa, FL 33635

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

Maria E. Abate, Esq.

Colodny Fass, PLLC

P.O. Box NOT acceptable

1401 NW 136th Avenue, Suite 200, Sunrise, FL 33323

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]
Signature of an officer or director

JOE HARRIS CTO/EVP
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]
Signature of Registered Agent

Date

If signing on behalf of an entity:

Colodny Fass, PLLC
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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA