

P060000491129

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

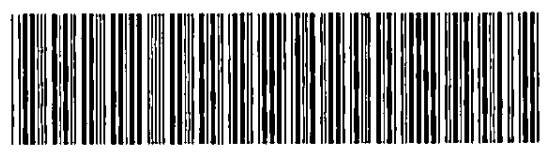
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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TALLAHASSEE FLORIDA

Flachg  
OCT 23 2017

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: nTouch Inc.

Name of Corporation

DOCUMENT NUMBER: P06000049629

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:

Clayton G. Gring Jr

Name of Contact Person

nTouch Inc.

Firm/Company

100 SE 5th Ave. #217

Address

Boca Raton, FL 33432

City/State and Zip Code

cgring@ntouch-inc.com

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

For further information concerning this matter, please call:

Clayton G. Gring Jr

Name of Contact Person

561 213-6535

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: nTouch Inc.
2. The principal office address: 100 SE 5th Ave #217 Boca Raton, FL. 33432
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 4/4/2006 Document number: P06000049629
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)

Clayton G. Gring Jr.

21190 Falls Ridge Way

Boca Raton FL. 33428

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

Clayton G. Gring Jr.

100 SE 5th Ave #217

P.O. Box NOT acceptable

Boca Raton FL. 33432

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.

Clayton G. Gring Jr.  
Signature of an officer or director

Clayton G. Gring Jr.

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.*

Clayton G. Gring Jr.  
Signature of Registered Agent

October 19, 2017

Date

If signing on behalf of an entity:

Clayton G. Gring Jr.

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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TALLAHASSEE, FLORIDA