## PO6000/23/43

| (Re                                     | equestor's Name)   |             |  |  |
|---|--------------------|-------------|--|--|
| (Ac                                     | idress)            |             |  |  |
| (Ac                                     | ldress)            |             |  |  |
| (Cit                                    | ty/State/Zip/Phon  | e #)        |  |  |
| PICK-UP                                 | ☐ WAIT             | MAIL.       |  |  |
| (Bu                                     | isiness Entity Nar | me)         |  |  |
| (Document Number)                       |                    |             |  |  |
| Certified Copies                        | _ Certificates     | s of Status |  |  |
| Special Instructions to Filing Officer: |                    |             |  |  |
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SECRETARY OF STATE
TALLAHASSEE, FISHAIE

## **COVER LETTER**

| TO: Amendment Section Division of Corporations  |   |  |  |  |
|---|---|--|--|--|
| SUBJECT: Actron Entities, Inc d   | ba Actron Engineer (Name of Corporation | ing<br>n)  |  |  |
| DOCUMENT NUMBER: P0600012   | 3143                                    |  |  |  |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. |   |  |  |  |
| Please return all correspondence concer   | ning this matter to the fo              | llowing:   |  |  |
| Douglas L Hermar  | n<br>(Name of Contact Pers              | on)  |  |  |
| Actron Engineering (Firm/Company)   |   |  |  |  |
| 2868 Chelsea Pl N (Address)   |   |  |  |  |
| Clearwater, FL 337  |   |  |  |  |
|   | (City/State and Zip Co                  | le)  |  |  |
| For further information concerning this   | matter, please call:                    |  |  |  |
| Douglas L. Hermann  | at ( 72                                 | 7 ) 531-5871   |  |  |
| (Name of Contact Person   | (Ar                                     | 7 531-5871<br>rea Code & Daytime Telephone Number)   |  |  |
| Enclosed is a \$35.00 check made payable  | e to the Department of S                | tate.  |  |  |
| Mailing Address Amendment So Division of Co P.O. Box 6327 Tallahassee, F                      | rporations                              | 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

| statement of cha  | provisions of sections 607.0502, 617.0502<br>inge is submitted for a corporation organi<br>r to change its registered office or registe   | zed under the laws of the State of Fl   | orida  |
|---|---|---|--|
| 1. The name of  | he corporation: Actron Entities, Inc  | <del> </del>  |  |
| 2. The principal  | office address: 2868 Chelsea Pl N, Clear  | water, FL 33759   |  |
| 3. The mailing a  | ddress (if different): Same   |   |  |
| 4. Date of incorp   | poration/qualification: 09/26/2006  | Document number: P0600012   | 3143   |
|   | street address of the current registered ag tment of State:   | ent and registered office on file with  | the  |
|   | Douglas L. Hermann  |   |  |
|   | 1410 Palmer Ln  |   | 97<br>SE 97  |
|   | Palm Harbor, FL 34685   |   | O7 MAR 26  |
| 6. The name and (if changed):   | street address of the new registered agent  | t (if changed) and /or registered office  | E III  |
|   | Douglas L. Hermann  |   | 9: 25<br>STATE<br>LORID                                    |
|   | 2868 Chelsea Pl N   |   | DM SI  |
|   | (P.O. Box NOT acceptable) Clearwater, FL 33759  |   |  |
|   | ss of its registered office and the street a<br>be identical.   |   |  |
| Such change wa<br>authorized by the   | s authorized by resolution duly adopted e board, or the corporation has been not  |   |  |
| (Signatu  | re of an officer or director)   | Douglas L. Hermann, President (Printed or typed name and title  |  |
| I hereby accept<br>I further agree t<br>of my duties, an<br>document is beit<br>corporation has | the appointment as registered agent and<br>o comply with the provisions of all statu<br>d I am familiar with and accept the oblig<br>ng filed merely to reflect a change in the<br>been notified in writing of this change. | l agree to act in this capacity<br>tes relative to the proper and compl<br>gation of my position as registered a<br>registered office address, I hereby | lete performance<br>agent. Or, if this<br>confirm that the |
| 1 KA  |   | 3/6/2007  |  |
| If signing on bel   | nalf of an entity:  | (Date)  |  |
| Douglas L. He   | rmann yped or Printed Name)   |   |  |

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

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