

P07000104054

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

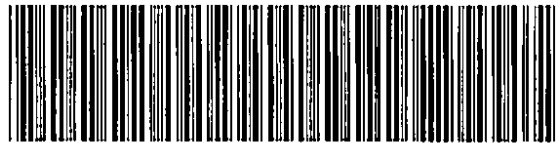
(Business Entity Name)

(Document Number)

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FILED  
JAN 15 2019  
CLERK OF SUPERIOR COURT  
JAN 15 2019

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JAN 15 2019

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Select Sophware, Inc.

Name of Corporation

**DOCUMENT NUMBER:** P07000104054

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:

**Kathleen Griffiths**

Name of Contact Person

**Select Sophware, Inc.**

Firm/Company

**1204 S. Broad St**

Address

**Brooksville, FL 34601**

City/State and Zip Code

**kathleen.griffiths@sg.com**

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

For further information concerning this matter, please call:

**Kathleen Griffiths**

Name of Contact Person

**352 799-1490**

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

FILED  
STATE  
CORPORATIONS  
DIVISION  
MAY 17 2007  
TALLAHASSEE, FL

**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: Select Sophware, Inc. /dba Select Group, Inc  
2. The principal office address: 1204 S. Broad Street  
Brooksville, FL 34601  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: September 18th 2007 Document number: P07000104054

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)

Kathleen Griffiths

19646 Autumn Oak Ln

Brooksville, FL 34601

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

Kathleen Griffiths

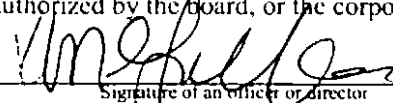
1204 S. Broad St

P.O. Box NOT acceptable

Brooksville, FL 34601

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 of an officer or director

Kathleen Griffiths

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 of Registered Agent

12/31/2018

Date

If signing on behalf of an entity

  
\_\_\_\_\_  
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)

FILED  
DIVISION OF STATE  
CORPORATIONS  
12 JAN -7 PM 5:47  
TALLAHASSEE, FL