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R. WHITE

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Presidio Service Solutions, Incorporated

Name of Corporation

DOCUMENT NUMBER: I

P07000125398

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:

Marjorie Marcinelli

Name of Contact Person

Presidio Service Solutions, Incorporated

Firm/Company

701 Scarboro Rd, Ste 222

Address

Oak Ridge, TN 37830

City/State and Zip Code

alrod@presidio-ssi.com

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

For further information concerning this matter, please call:

Marj Marcinelli

₄,865

574-4196

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
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 State statement of change is submitted for a corporation organized under the laws of the State of Florida State of Flori	ida		
in order to change its registered office or registered agent, or both, in the State of Floria. 1. The name of the corporation: Presidio Service Solutions, Incorporated	ida. 		
2. The principal office address: 701 Scarboro Rd, Ste 222, Oak Ridge, TN 378	330		
3. The mailing address (if different): same			
4. Date of incorporation/qualification: 11/20/2007 Document number: P070001	25398)	
5. The name and street address of the current registered agent and registered office on file with t Florida Department of State: (If resigned, enter resigned)	he		
Spiegel & Utrera, P.A.	5—1. A		
1840 SW 22nd St, 4th Floor		NYF 7	1 ***
Miami, FL 33145		≆ <u>≅</u>	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		25 25 25 25	
InCorp Services, Inc.		(D)	
17888 67th Court North			
P.O. Box NOT acceptable			
Loxahatchee, FL 33470			
The street address of its registered office and the street address of the business office of its regas changed will be identical.	gistered :	agent,	,
Such change was authorized by resolution duly adopted by its board of directors or by an office authorized by the board, or the corporation has been notified in writing of the change.	cer so		
Alfredo Rodriguez, Preside	nt		
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 comple performance of my duties, and I am familiar with and accept the obligation of my position as agent. For, if this document is being filed merely to reflect a change in the registered office ach hereby confine that the corporation has been notified in writing of this change.	te registera Idress, I	ed	
Signature of Registered Agent O1-21-2014 Date			
If signing on behalf of an entity:			
Soste A Sovensen on behalf of Incorp Services, Inc.			
* * * 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)