-P080000 14998

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
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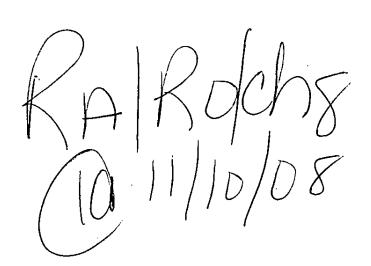


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SECRETARY OF STATE OIVISION, OF STATE



COVER LETTER

Amendment Section Division of Corporations

TO:

and the state of t			
SUBJECT: Florida Technology Consultants (Name of Corporati	on)		
DOCUMENT NUMBER: P08000016998			
The enclosed Statement of Change of Registered Office/Agent	and fee are submitted for filing.		
Please return all correspondence concerning this matter to the f	following:		
Michael A. Ri (Name of Contact Pe	ley rson)		
Florida Technology Consultants (Firm/Company)			
5712 Holly Court (Address)			
Palm Harbor, Fl (City/State and Zip C	<u>34685</u> Code)		
For further information concerning this matter, please call:			
Michael A. Riley at ((Name of Contact Person)	617) 877-3195 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

Puṛṣuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, th 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.	is
1. The name of the corporation: Florida Technology Consultants, TNC:	
2. The principal office address: 5712 Holly Court Palm Harbor, FL 34685	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 02/19/08 Document number: P08000016998	
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)	
Corporation Service Company	
1201 Hays Street	S
Tallahassee, FL 32301	A SECTION
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	SECRETARY OF
Michael A. Riley	CORPORATIONS
5712 Holly Court (P.O. Box NOT acceptable)	: 56
Palm Harbor, FL 34685	
The street address of its registered office and the street address of the business office of its registered as changed will be identical.	ed agent,
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.	ı
(Signature of an officer or director) Michael A Riley President (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 per of my duties, and I am familiar with and accept the obligation of my position as registered agent. Of a document is being filed merely to reflect a change in the registered office address, I hereby confirm corporation has been notified in writing of this change.	formance Or, if this 1 that the
Mu he a 11/03/05	
(Signature of Registered Agent) (Date) If signing on behalf of an entity:	
n signing on cenan of an entity.	
(Typed or Printed Name)	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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