## 08000084522

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	,
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
	•	

Office Use Only



12/12/11--01015--015 \*\*35.00

FIVISION OF CONDONATING

RA. Olg.
C.COULLIETTE

DEC 1 3 2011

**EXAMINER** 

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Acceletron Corporation Name of Corporation
DOCUMENT NUMBER: <u>P08000084522</u>
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:
Kevin Rocal Name of Contact Person
Acceletron Corporation Firm/Company
4405 W Sam Allen Rd
Plant City FL 33565 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (813) 300 - 8534  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

1 - - -

## 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: Acceletron Corporation
2. The principal office address: 10 E Reynolds St. Suite 803
<u> </u>
3. The mailing address (if different): 4405 W. Sam Allen Rd
- Plant City, FL 33565
4. Date of incorporation/qualification: 9115/08 Document number: P0800084522
<ol> <li>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)</li> </ol>
Kevin Road
2811 Cherry Tree La
Plant City, FL 33565
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
hevin Rood
4405 W. Sam Allen Rd.
Plant City, FL 33565
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  Kevin Rood  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.
Day end 12/6/11
Signature of Registered Agent Date
If signing on behalf 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

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