

P090000 22449

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

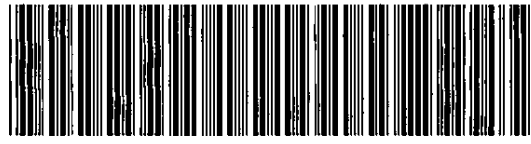
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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07/26/10--01034--005 **35.00

10 AUG 30 PM 2:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AUG 30 2010

Handwritten signature and date: 8/20/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GALAXY GPS SYSTEMS, INC.
Name of Corporation

DOCUMENT NUMBER: P09000022449

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:

BRAD SCHOENWALD
Name of Contact Person

GALAXY GPS SYSTEMS, INC.
Firm/Company

550 SW 60TH AVE
Address

PLANTATION, FL 33317
City/State and Zip Code

bcschoe@msn.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRAD SCHOENWALD at (954) 560-9080
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2010 AUG 30 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 16, 2010

BRAD SCHOENWALD
550 SW 60 AVE
PLANTATION, FL 33317

SUBJECT: GALAXY GPS SYSTEMS INC
Ref. Number: P09000022449

We have received your document for GALAXY GPS SYSTEMS INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6957.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 410A00019571

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: GALAXY GPS SYSTEMS, INC.
- 2. The principal office address: 7485 NW 4TH STREET PLANTATION, FL 33317
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 03/11/2009 Document number: P09000022449

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)

BRAD SCHOENWALD
6905 W. BROWARD BLVD STE 109
PLANTATION, FL 33317

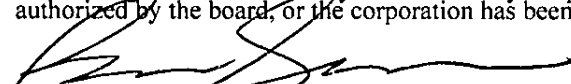
10 AUG 30 PM 2:31
 SECRETARY OF STATE
 TALLAHASSEE, FL 32399
 APPROVED AND FILED

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

BRAD SCHOENWALD
550 SW 60TH AVE
P.O. Box NOT acceptable
PLANTATION, FL 33317

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.

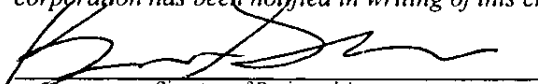


 Signature of an officer or director

BRAD SCHOENWALD

 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

8-26-10

 Date

If signing on behalf of an entity:

 Typed or Printed Name

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