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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT:	Change of Registered Office/Agent	
Name of Corporatio	n	
DOCUMENT NUN	MBER: CR2E045 (04/13)	
The enclosed Staten	ment of Change of Registered Office/Agent and fee are submitted for filing.	
Please return all con	rrespondence concerning this matter to the following:	
Gerri Dundie		
Name of Contact Pe	erson	
Hoverfly Technologic	es, Inc.	
Firm/Company		
12151 Research Parks	way, Suite 100	
Address		
Orlando, FL 32826		
City/State and Zip C	Code	
	gerri.dundie@hoverflytech.com	
E-mail address: (to	o be used for future annual report notification)	
For further informat	tion concerning this matter, please call:	
Gerri Dundie	at (407) 985-4500 ne of Contact Person Area Code & Daytime Telephone N	
Nam	ne of Contact Person Area Code & Daytime Telephone N	Tumber

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

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submittec	l for a corporation o	7.0502, 607,1508, or 617.1508, Florida Statutes, thi organized under the laws of the State of <mark>Florida</mark> registered agent, or both, in the State of Florida.	<i>S</i>	
The name of the corporation: Hoverfly Technolog The principal office address: 12151 Research Page			gies, Inc.		
					
		Orlando, FL 32826			
3. The mailing a	ddress (if differ	ent):			_
4. Date of incorp	oration/qualific	cation: August 30, 20	Document number: P10000072009		_
5. The name and	street address of		ered agent and registered office on file with the		
	CT Corporation	System			
	1200 South Pin	e Island Road			w
	Plantation, FL 3	32708		2020 FEB	9151A16
6. The name and (if changed):	street address of	of the new registered	d agent (if changed) and /or registered office	11 83	H DY CORP
	Gerri Dundie			P	労の場合
	12151 Research	n Parkway, Suite 100		2:	
	P.O. Box NO l'acceptable				
	Orlando, FL 32	820			
The street addre as changed will	ss of its registe be identical.	ered office and the s	street address of the business office of its registered	d agent.	
Such change wa authorized by th	is authorized by he board, or the	resolution duly ad corporation has be	dopted by its board of directors or by an officer so en notified in writing of the change.		34. 12.
H	M		Stephen Walters, President and COO		34 30
,	e of an officer or dir		Printed or typed name and title		
I further agrée t of my duties, an docúment is bei	o comply with d I am familiar ng filed merely	nt as registered age the provisions of al with and accept th to reflect a change in writing of this ch	m and agree to act in this capacity, Il statutes relative to the proper and complete perfo we obligation of my position as registered agent. O win the registered office address, I hereby confirm wange.	ormane or if this that the	Res.
He	ui Du	ndie.	Gerri Dundie, Corporate Secretary		
Sign	nature of Registered	Agent	Date		
If signing on be	half of an entity	y:			
173	ped or Printed Name	e			

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