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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H19000107097 3)))



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To:

Division of Corporations

fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

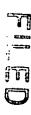
Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email 1	Address:			
FBBIL	Adaress:			

REGISTERED AGENT CHANGE XETA TECHNOLOGIES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00



Electronic Filing Menu Corporate Filing Menu

Help

C. GOLDEN

H190001070973

COVER LETTER

TO: Amendment Section Division of Corporations

XETA TECHNOLOGIES, INC.

P10531

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:

Mary Castillo

Name of Contact Person

Registered Agent Solutions, Inc.

1701 Directors Blvd, Ste 300

Address

Austin, TX 78744

City/State and Zip Code

notices@rasi.com

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

For further information concerning this matter, please call:

Castillo

at (888 705-7274
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

statement of cha	nge is submitted	for a corporation org	502, 607,1508, or 617,150 anized under the laws of th stered agent, or both, in th	he State of Oklah	oma	
1. The name of t	hé corporation:	KETA TECHN	IOLOGIES, INC			
			PARHAM ROA			
LITTLE		AR	72212			
3. The mailing a	ddress (if differe	nt):			<u> </u>	-
4. Date of incorp	ooration/qualifica	tion: 06/23/198	B6 Document numbe	E P10531		
		the current registered fresigned, enter resign	agent and registered officined)	ce on file with the		
	CT CORF	PORATION S	YSTEM	~		
	1200 SOL	JTH PINE ISL	AND ROAD		201	
	PLANTAT	10N, FL 333	24		2019 APR	<u>-M</u>
6. The name and (if changed):	street address of	the new registered ag	ent (if changed) and /or re	egistered office	-	
	Registered	Agent Solutions	, Inc.		AM IO:	
	155 Office F	Plaza Dr., Suite	OT acceptable	· · · · · · · · · · · · · · · · · · ·	22	
	Tallahassee					
	· · ·					
The street addre as changed will	ss of its registere be identical.	ed office and the stree	t address of the business	office of its registe	ered agen	ι t ,
Such change wa authorized by th	s authorized by a board, or the o	resolution duly adopte orporation has been n	ed by its board of director of the confied in writing of the c	rs or by an officer s hange.	50	
/S/ Michelle Simpson Signature of an officer or director			Michelle Simps	son Vice Pre	sident	
I hereby accept I further agree t performance of agent. Or, if thi	the appointment o comply with th my duties, and I s document is be	as registered agent a e provisions of all sta am familiar with and ing filed merely to re	nd agree to act in this cap tutes relative to the prop accept the obligation of r flect a change in the regis in writing of this change.	pacity. er and complete my position as regi stered office addre	istered 1888, I	
	yr.		04/01/2019			
Sign If signing on bel	and of Registered Ag	corc	Da	alc		
Justine Karn	ell - Assista	nt Secretary				
Ty	ped or Printed Name					