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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Alexander Capital Equity Corp.

Name of Corporation

DOCUMENT NUMBER: 11000103771

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:

Alexander Hamilton

Name of Contact Person

Alexander Capital Equity Corp.

Firm/Company

1365 N. Courtenay Parkway, Suite A

Address

Merritt Island, FL 32953

City/State and Zip Code

alexander@alexandercapitalequity.com

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

For further information concerning this matter, please call:

Alexander Hamilton

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

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.
1. The name of the corporation: Alexander Capital Equity Corp.
2. The principal office address: 1365 N. Courtenay Parkway, Suite A
Merritt Island, FL 32953
3. The mailing address (if different): P.O. Box 307
Cocoa, FL 32923
4. Date of incorporation/qualification: 12/06/2011 Document number: 11000103771
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)
CF Consulting LLC
1365 N. Courtenay Parkway, Suite A
Merritt Island, FL 32953
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Northwest Registered Agent, LLC.
3030 N. Rocky Point Dr. STE 150A
P.O. Box NOT acceptable
Tampa, FL 33607
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.
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Signature of an officer or director 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 1/07/14/ Date
If signing on behalf of an entity:
Dan Keen-Manager
Typed or Printed Name * * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314