# P120004565

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SECRETARY OF STATE

SEP 19 2013

R. WHITE



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 26, 2013

**ANTONIO HERRERG** OTC INNOVATION INC 325 NE SPANISH RIVER BLVD. BOCA RATON, FL 33442

SUBJECT: OTC INNOVATION, INC.

Ref. Number: P12000045565

We have received your document for OTC INNOVATION, 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):

The name of the new registered agent must be desingated in the appropriate space.

The document must also contain the address of the registered agent which must be at a Florida street address.

The registered agent must sign accepting the designation.

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) 245-6050.

Rebekt h White ਜੇegulatory Specialist Ⅱ

Letter Number: 713A00020280

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August 26, 2013

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Rebekah White Regulatory Specialist II

Letter Number: 713A00020280

### **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: OTC INNOUATIONS INC  Name of Corporation
DOCUMENT NUMBER: P 12 0000 45565.
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:
Antonio Herrerg.  Name of Contact Person  OTC INNOVATION INC.  Firm/Company  325 NE SPANISH RIVER BLUD.  Address
BOCA RATON FL 33442.  City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Antonio Herrera at (SO) 315-3454.  Name of Contact Person Area Code & Daytime Telephone Number
Maine of Contact Ferson 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 ofin order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: OTC INNOVATION, ZNC.
2. The principal office address: 325 NE SPANISH RIVER BLVD.  BOCA RATON, I-L 33431
3. The mailing address (if different):
4. Date of incorporation/qualification: O5/16/20/3 Document number: P/2000645565
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)
Herrera, Antonio
2610 SE 5th Circle Unit 69A
BOYNTON BEACH, FL33435 [RESIGNER
6. The name and street address of the new registered agent (if changed) and /or registered offi  Town Borrached  10210 Fresh Meadow Line  P.O. Box NOT acceptable  Bock Ration FL 33498
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  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 which the corporation has been notified in writing of this change.
Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name

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