

P13000001053

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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T. LEMIEUX

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: CUSTOMER TRACK INC  
Name of Corporation

DOCUMENT NUMBER: P13000001053

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:

EDMOND B SHELL

Name of Contact Person

CUSTOMER TRACK INC

Firm/Company

12617 CATAMARAN PL

Address

TAMPA, FL 33618

City/State and Zip Code

EDSHELL@ME.COM

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

For further information concerning this matter, please call:

EDMOND B SHELL

813 610-1943

Name of Contact Person

at ( )

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 in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CUSTOMER TRACK INC  
2. The principal office address: 12617 CATAMARAN PL TAMPA FL 33618

3. The mailing address (if different): P.O. BOX 272847, TAMPA, FL 33688-2847

4. Date of incorporation/qualification: 01/03/2013 Document number: P13000001053

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)

EDMOND B SHELL

3135 S.R. 580 Ste 13  
Safety Harbor, FL 34695

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

EDMOND B SHELL

12617 CATAMARAN PL

P.O. Box NOT acceptable

TAMPA, FL 33618

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

EDMOND B SHELL P

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

07/24/2015

Date

If signing on behalf of an entity:

EDMOND B SHELL

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

CD35045 (02/11)

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15 JUL 27 AM 7:10  
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