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C. CARROTHERS



## **COVER LETTER**

	nent Section 1 of Corporations				
SUBJECT:	Generex Systems, Inc. Name of Con	- rporation			
DOCUMENT !	NUMBER: P13000041501				
The enclosed St	atement of Change of Registered Office.	Agent and fee are submitted for filing.			
Please return all	correspondence concerning this matter	to the following:			
	Christopher W.	Boss, Esq.			
Name of Contact Person					
Boss, Arrighi & Hoag, P.L.					
Firm/Company /					
	9887 4th Street N, Suite 202				
	Address				
St. Petersburg, FL 33702					
City/State and Zip Code					
	cboss@protectyourfuture.com				
	E-mail address: (to be used for fu	ture annual report notification)			
For further info	rmation concerning this matter, please ca	all:			
Jessica F	Robinson	727 471-0039			
	Name of Contact Person	at ( 727 ) 471-0039 Area Code & Daytime Telephone Number			
Enclosed is a \$3	35.00 check made payable to the Departi	ment 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

CR2E045 (03/12)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS $\frac{1}{2} \frac{1}{2} \frac{1}{2$

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, o statement of change is submitted for a corporation organized under the	r 617.1508, Florida Statutes, this laws of the Statel of AUC 3 1 AH 9: 36
in order to change its registered office or registered agent, or	both, in the State of Florida.
1. The name of the corporation: Generex Systems, Inc.	SFORE MARY OF STATE  A MASSER SERVED ON
2. The principal office address: 100 S. Ashley Drive,	Suite 600
Tampa, FL 33602	
3. The mailing address (if different): 1236 F Highway 16 N	N, Denver, NC 28037
4. Date of incorporation/qualification: 12/13/13 Docume	ent number:P13000041501
5. The name and street address of the current registered agent and regis Florida Department of State: (If resigned, enter resigned)	tered office on file with the
Brian D. Arrìghi	
5321 Primrose Lane Cir	
Tampa, FL 33647	
6. The name and street address of the new registered agent (if changed) (if changed):  Boss, Arrighi & Hoag, P.L.	and /or registered office
9887 4th Street N., Suite 202	
P.O. Box NOT acceptable St. Pete, FL 33702	
The street address of its registered office and the street address of the as changed will be identical.	business office of its registered agent,
Such change was authorized by resolution duly adopted by its board authorized by the board, or the corporation has been notified in writing	of directors or by an officer so ng of the change.
	Baileys Winted or typed name and title
I hereby accept the appointment as registered agent and agree to act I further agree to comply with the provisions of all statutes relative to performance of my duties, and I am familiar with and accept the obligagent. Or if his document is being filed merely to reflect a change i hereby confirm that the corporation has been notified in writing of the signature of Registeral Agent  If signing on behalf of an entity:	o the proper and complete
Typed or Printed Name	

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