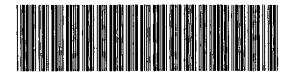
P15000010913

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





100280860891

01/12/16--01020--022 **35.00

SEGRETARY OF STATE



COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Florida Interlock Inc
Name of Corporation
P15000010913

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:

Name of Contact Person

Firm/Company

4519 George Rd

Address

Tampa FL 33634

City/State and Zip Code

chuck@flinterlock.com

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

For further information concerning this matter, please call:

David C. Jones

Name of Contact Person

Name of Contact Person

at (970) 388-9500

Area Code & Davtime 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





FLORIDA DEPARTMENT OF STATE **Division of Corporations**

March 10, 2016

DAVID C JONES 2ND MAILING P.O. BOX 148 WINDSOR, CO

SUBJECT: FLORIDA INTERLOCK INC.

Ref. Number: P15000010913

We have received your document for FLORIDA INTERLOCK INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 116A00002874

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: Florida Interlock Inc
2. The principal office address: 4519 George Rd, Ste 155
Tampa, FL 33634
3. The mailing address (if different): P.O. Box 148 Windsor CO
4. Date of incorporation/qualification: 01/26/2015 Document number: P15000010913
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)
Christina Chong (resigned)
1830 N. University Dr. #154
Plantation, FL 33322
6. The name and street address of the new registered agent (if changed) and /or registered office: (if changed):
David C. Jones
4519 George Rd, Ste 155, Tampa FL 33634
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.
David c Jones, President
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.
01/07/2016
Signature of Registered Agent Date
If signing on behalf of an entity:
David C Jones 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
CR2E045 (03/12)