

P15000012246

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
15 MAY 15 AM 9:54
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CirusSoft, Inc

Name of Corporation

DOCUMENT NUMBER: P15000012246

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:

William B Husselbaugh

Name of Contact Person

CirusSoft

Firm/Company

1999 Carolina Ave NE

Address

St. Petersburg, FL 33703

City/State and Zip Code

bhusselbaugh@cirussoft.com

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

SECRET
TALLAHASSEE, FL
15 MAY 15 AM 9:54
1999

For further information concerning this matter, please call:

William B Husselbaugh

Name of Contact Person

at (727) 521-9585

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 14, 2015

WILLIAM B HUSSELBAUGH
1999 CAROLINA AVE NE
ST. PETERSBURG, FL 33703

SUBJECT: CIRUSSOFT INC.
Ref. Number: P15000012246

We have received your document for CIRUSSOFT 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 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.

Rebekah White
Regulatory Specialist II

Letter Number: 915A00007347

**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: CirusSoft, Inc
2. The principal office address: 1999 Carolina Ave NE, St. Petersburg, FL 33703
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 2/5/2015 Document number: P15000012246
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)

resigned

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

William B Husselbaugh

1999 Carolina Ave NE

P.O. Box NOT acceptable

St. Petersburg, FL 33703

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

William B Husselbaugh, President
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

8 April 2015
Date

If signing on behalf of an entity:

William B Husselbaugh

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)

15 MAY 15 AM 9:54
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TALLAHASSEE, FL 32314