P/60000 10793

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Power Technology Industries, Inc.

Name of Corporation

DOCUMENT NUMBER: P16000010793

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:

Christina Hansen

Name of Contact Person

CTM Administrative Management Services, Inc.

Firm/Company

12291 US HWY 41 N

Address

Palmetto, FL 34221

City/State and Zip Code

christina@ptechindustries.com

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

For further information concerning this matter, please call:

Chris Hansen

,844

797-8324

Name of Contact Person

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

=	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
,	ge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the	e corporation: Power Technology Industries, Inc.
2. The principal or Palmetto,	ffice address: 12291 US HWY 41 N FL 34221
3. The mailing add	dress (if different):
4. Date of incorpo	oration/qualification: 02/06/2016
	street address of the current registered agent and registered office on file with the ment of State: (If resigned, enter resigned)
<u>_</u>	JNITED STATES CORPORATION AGENTS, INC.
1	13302 Winding Oak Court
7	Гатра, FL 33612
6. The name and s (if changed):	street address of the new registered agent (if changed) and /or registered office
(CTM Administrative Management Services, LLC.
1	12291 US HWY 41 N
	P.O. Box NOT acceptable Palmetto, FL 34221
The street address as changed will b	s of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
Signature	Christina Hansen, President Printed or typed name and title
I further agree to performance of m	he appointment as registered agent and agree to act in this capacity. I comply with the provisions of all statutes relative to the proper and complete It y duties, and I am familiar with and accept the obligation of my position as registered I document is being filed merely to reflect a change in the registered office address, I I had the corporation has been notified in writing of this change.
<u>_</u>	Ce to 3/13/18
	ture of Registered Agent Date
If signing on beha	•
Christina Ha	ed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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

CR2E045 (03/12)