

P17000033034

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

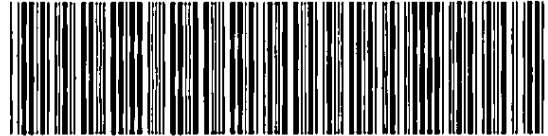
(Business Entity Name)

(Document Number)

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2017 NOV 27 AM 10:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 NOV 27 11:56:10

RH/R0/chg

NOV 28 2017

ALBRIGHT

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 928602 4726940

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : November 27, 2017

ORDER TIME : 11:0 AM

ORDER NO. : 928602-020

CUSTOMER NO: 4726940

CHANGE OF AGENT

NAME: OPTICON, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Roxanne Turner -- EXT#

EXAMINER:

(10)

**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: OPTICON, INC.
2. The principal office address: 5350 NW 35TH AVENUE FORT LAUDERDALE, FL 33309
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 04/11/2017 Document number: P17000033034

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)

TARDELL, ROBERT

5350 NW 35TH AVENUE FORT LAUDERDALE, FL 33309

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

Corporation Service Company

1201 Hays Street

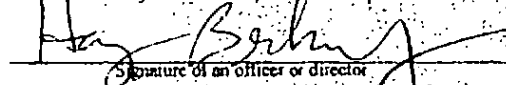
P.O. Box NOT acceptable

Tallahassee

FL 32301

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

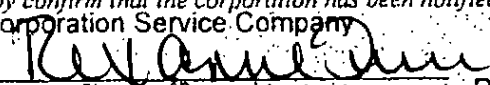
Harvey Berkowitz

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.

Corporation Service Company

By: 

Signature of Registered Agent

Roxanne Turner

Date

Asst. Vice President

If signing on behalf of an entity:

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

CR2P045 (03/12)

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