

P18 0000 52465

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

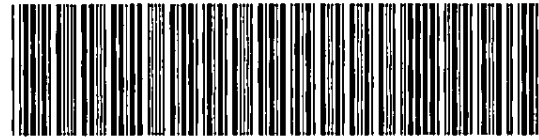
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JUL 16 2020

S. TALLENT
AUG 1 2020

2020 JUL 16 PM 12:13

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July 14, 2020

VIA FedEx
Florida Department of State
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Statement of Change of Registered Agent:

Kittelson Engineering, P.A.

Dear Sir/Madam,

Please find enclosed a fully executed Statement of Change of Registered Agent, along with a check for the \$35.00 filing fee.

Thank you for your attention to this matter. Please contact me with any questions at pcollins@licensesure.biz.

Sincerely,

A handwritten signature in black ink that reads "Phoenix Collins". The signature is written in a cursive, flowing style.

Phoenix Collins

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Kittelson Engineering, P.A.
Name of Corporation

DOCUMENT NUMBER: P18000052465

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:

Phoenix Collins

Name of Contact Person

LicenseSure LLC

Firm/Company

801 Second Avenue, 15th Floor

Address

New York, NY 10017

City/State and Zip Code

pcollins@licensesure.biz

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

For further information concerning this matter, please call:

Phoenix Collins

Name of Contact Person

at (844) 554-2367

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: Kittelson Engineering, P.A.
2. The principal office address: 20 S. Charles Street, Suite 402
Baltimore, MD 20201

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 06/11/2018 Document number: P18000052465

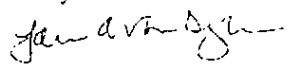
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Patricia A. Harris Esq.
74 N Woodward Ave, #85007
Tallahassee, FL 32313, U.S.

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
c/o Patricia A. Harris Esq.
1400 Village Square Blvd #3-85007
Tallahassee, FL 32312
P.O. Box NOT acceptable

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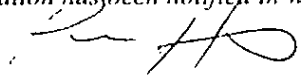
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Lawrence A Van Dyke, CFO
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

07/14/2020
Date

If signing on behalf of an entity:

Typed or Printed Name

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