P96000 001 A45

(Red	uestor's Name)	
(Add	lress)	
(Address)		
(City	/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nam	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only

524-



400338271364

01/03/20--01021--001 ++25.00

2070 FFB 12 PH I2: 57

C GOLDEN FEB 2 0 2020

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Replay Systems, Inc. Name of Corporation	
Name of Corporation	
DOCUMENT NUMBER: P96000091445	
The enclosed Statement of Change of Registere	ed Office/Agent and fee are submitted for filing.
Please return all correspondence concerning thi	s matter to the following:
Scott Hurley	
Name of Contact Person	
Replay Systems, Inc.	
Firm/Company	
4800 North Federal Highway, Suite 104B	
Address	
Boca Raton, FL 33431	
City/State and Zip Code	
scott.hurley@replaysystems.	com
E-mail address: (to be used for future annua	al report notification)
For further information concerning this matter,	please call:
Scott Hurley	at (954) 267-9199
Name of Contact Person	at (954)267-9199 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the	e Department of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporati	
P.O. Box 6327	Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (04/13)



REPLAY SYSTEMS

4800 North Federal Highway, Suite 104B Boca Raton, FL 33431

Tel: 800 722 3472 Local: 954 267 9199

Local: 954-267-9199 | Fax: 954-267-9184

February 10, 2020

Claretha Golden, Regulatory Specialist II Florida Department of State Division of Corporations P.O. BOX 6327 Tallahassee, FL 32314

Reference: Changes to 2020 Annual Report, # P96000091445

Dear Ms. Golden.

We called (850) 245 – 6050 concerning the filing of our document. We were advised that the only discrepancy is the word "Suite" prior to the number 104B. If we wanted to proceed with the addition of the word "Suite", we were to send the form back.

Therefore, enclosed you will find the Statement of Change of Registered Office or Registered Agent of Both for Corporations form. Yes, we would like the word "Suite" added to our address prior to the number 104B. Both our principal and mailing address should be as follows:

4800 North Federal Highway Suite 104B Boca Raton, FL 33431

If you have any questions, please feel free to contact me at (954) 267 - 9199.

Respectfully,

Scott Hurley

President and CEO Replay Systems, Inc.

January 31, 2020

SCOTT HURLEY 4800 NORTH FEDERAL HIGHWAY SUTIE 104B BOCA RATON, FL 33431

SUBJECT: REPLAY SYSTEMS, INC.

Ref. Number: P96000091445

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The changes was made on the 2020 Annual Report.

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.

Letter Number: 820A00002308

Claretha Golden Regulatory Specialist II

2020 FEP 12 6:11:46

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statinger is submitted for a corporation organized under the laws of the State of Flor Floringer its registered office or registered agent, or both, in the State of Floringer	ida	
1. The name of t	he corporation: Replay Systems, Inc.		
2. The principal Boca Raton, FL	office address: 4800 North Federal Highway, Suite 104B		
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 11/1/1996 Document number: P960000914-	15	
	I street address of the current registered agent and registered office on file with t tment of State: (If resigned, enter resigned)	he	
	Hurley, Scott		
	6555 N. Powerline Road, Stc. 105		
	Fort Lauderdale, FL 33309	aagee l	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		12 PH12:5	المد.
	Hurley, Scott	57	
	4800 North Federal Highway, Suite 104B		
	P.O. Box NOT acceptable Boca Raton, FL 33431		
The street addreas changed will	ess of its registered office and the street address of the business office of its rebe identical.	gistered	agent,
Such change was authorized by the	is authorized by resolution duly adopted by its board of directors or by an off observed, or the corporation has been notified in writing of the change.	icer so	
	Scott Hurley, President and CEO Printed or typed name and title		
I hereby accept	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and comple d l am familiar with and accept the obligation of my position as registered aging filed merely to reflect a change in the registered office address. I hereby is been notified by writing of this change.	te perfoi zent. Or onfirm ti	rmance ; if this hat the
	12/30/19		
If signing on be	half of an entity:		
	yped or Printed Name		

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