## P9700001H473

Requestor's Name Daniel G McAllister 9723 Oak St NE St Petersburg FL 33702-2611 Office Use Only CORPORATION NAME(S) & DUCUMEN 1 NUMBER(S), (if known): 1. (Corporation Name) (Document #) (Corporation Name) (Document #) 3. (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy Pick up time Walk in Mail out Will wait ☐ Photocopy Certificate of Status AMENDMENTS NEW FILINGS Profit Amendment Resignation of R.A., Officer/Director NonProfit Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/ QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement

Trademark

Other

Examiner's Initials

Charter No.	
Date Filed	

## STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT

Pursuant to the provisions of Sections 607.0501 and 607.0502, or 607.1508, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office and registered agent in the State of Florida.	
1. The name of the corporation is: SOFTWARE INNOVATIONS, INC.	
2. The name and address of its present registered agent is:	
CORPORATION INFORMATION SERVICES, INC.  1201 Hays Street  Tallahassee, Florida 32301	
3. The name and street address to which its registered agent is to be changed is:  (P.O. BOX NOT ACCEPTABLE)	
Daniel G. McAllister  9723 Oak Street NE	
St. Petersburg, FL 33702-2611	
<ul> <li>4. The street address of its registered office and the street address of the business office of its registered agent, as changed, are identical.</li> <li>5. Such change was authorized by resolution duly adopted by its poard of directors or by an officer of</li> </ul>	
the corporation so authorized by the board of directors.  Daniel G. McAllister, President (Typed or printed name and title)  Signature  (President or Vice President)	
Date Munic REEN NAMED AS DECISTEDED ACTIVE AND TO A COURT OF THE PARTY	
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 UNDER SECTION 607.0505, FLORIDA STATUTES.	
Please Print/Type Name Daniel G. McAllister	
Signature (Agent)	
Date Agent 1, 1997	

FILING FEE \$35

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