

V22266

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

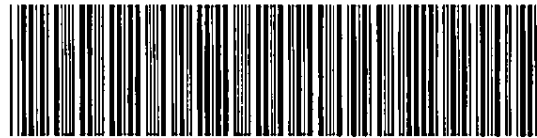
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: _____

AMTC

Name of Corporation

DOCUMENT NUMBER: _____

V 22266

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:

Elaine Prince

Name of Contact Person

Firm/Company

9324 Bob Cat Drive

Address

Weeki Wachee FL 34613

City/State and Zip Code

19 Prince42@gmail.com

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

For further information concerning this matter, please call:

Elaine Prince

Name of Contact Person

at

(727) 754-6844

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 9, 2018

ELAINE PRINCE
9324 BOBCAT DRIVE
WEEKI WACHEE, FL 34613

SUBJECT: APPLIED MEDIA TECHNOLOGIES CORPORATION
Ref. Number: V22266

We have received your document for APPLIED MEDIA TECHNOLOGIES CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

It appears the registered agent signed in the space for the officer/director.

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.

Irene Albright
Regulatory Specialist II

Letter Number: 818A00023222

RECEIVED

2018 NOV 19 PM 3:46

SECRETARY OF STATE
TALLAHASSEE, FL

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: Applied Media Technologies Corporation
2. The principal office address: 4091 AMTC Center Drive
Clearwater FL 33764-6976
3. The mailing address (if different): Same

4. Date of incorporation/qualification: 3-13-92 Document number: V22266

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)

Clayton Barton
4091 AMTC Center Drive
Clearwater, FL 33764

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

Elaine Prince
9324 Bob Cat Drive
P.O. Box NOT acceptable
Weeki Wachee FL 34613

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.

Elaine Prince
Signature of an officer or director

Elaine Prince V-P
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.

Elaine Prince
Signature of Registered Agent

11-3-2018
Date

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

CR2E045 (03/12)