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**Electronic Filing Cover Sheet** 

(((H14000051862 3)))



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Tor

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : BARNETT, BOLT, KIRKWOOD, LONG & MCBRIDE

Account Number: 072731001155

: (813)253-2020

Phone

Fax Number : (813)251-6711

\*\*Enter the email address for this business entity to be used for future annual report mailings, Enter only one email address please. \*\*

rmed 1	Addwood			

## REGISTERED AGENT CHANGE FAAC INTERNATIONAL, INC.

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01
\$43.75

C. LEWIS

MAR 4 2014

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

## 4

H14000051862 STATEM	IENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS	
Pursuant to the statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Planida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida ler to change its registered office or registered agent, or both, in the State of Florida.	
	the corporation: FAAC International, Inc.	
2. The principal	office address: 3160 Murrell Road, Rockledge, FL 32955	
3. The mailing a	address (if different):	
4. Date of incom	poration/qualification: November 18, 2010 Document number: P10000095546	
5. The name and Plorida Depar	d street address of the current registered agent and registered office on file with the orthonorm of State: (If resigned, enter resigned)	
	Robert Kempton	
	5151 Sunbeam Road, Suites #9-11	
	Jacksonville, FL 32257	E 7
6. The name and (if changed):	d street address of the new registered agent (if changed) and for registered office	CRETAR
	Craig E. Behrenfeld	SY OF
	601 Bayshore Boulevard, Suite 700	10 -
	P.O. Box NOT neceptable  Tampa, FL 33606	9: 09
The street addre	ess of its registered office and the street address of the business office of its registered agen I be identical.	ŀ,
Such change was authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
Stram.	K. Wortham CFO Printed or typed name and fills	
I hereby accept I further agree to performance of agent. Or, is thi hereby dorffrm	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 complete my duries, and I am familiar with and accept the obligation of my position as registered is document if being filed merely to reflect a change in the registered office address, I that the dorsoration has been notified in writing of this change.	
	3/3/14	
Sign	nature of Registered Agent Date	
If signing on bel	that f of an entity:	
——————————————————————————————————————	yped or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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