## F02000005560

(Requestor's Name	е)				
(Address)	,				
(Address)					
(City/State/Zip/Pho	ne #)				
PICK-UP WAIT	MAIL				
(Business Entity N	ame)				
(Document Number)					
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02/19/08--01018--001 \*\*35.00

SECRETARY OF STATE OF STATE OF CORPORATIONS

RARO 10,2,20.08

## **COVER LETTER**

Division of Corporations
SUBJECT: Netco, Inc.
(Name of Corporation)
•
DOCUMENT NUMBER:
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:
Julie Coyne
(Name of Contact Person)
National Corporate Services, Inc.
(Firm/Company)
2 Club Centre Court, Ste. 5
(Address)
•
Edwardsville, IL 62025
(City/State and Zip Code)
For further information concerning this matter, please call:
Julie Coyneat ( 866) 416-6274
Julie Coyne at (866 ) 416-6274  (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:  Amendment Section  Street Address:  Amendment Section
Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building
Tallahassee. FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

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

_	provisions of sections inge is submitted for a					
in orde	r to change its registe	red office or register	red agent, or both	, in the State of Flo	rida.	
1. The name of the corporation: Netco, Inc.				, Inc.		
2. The principal	office address: 401 F	OUNTAIN LAKES B	LVD. ST. CHARLI	ES MO 63301		
3. The mailing a	ddress (if different):_					
4. Date of incorp	oration/qualification:	11.05.20	Document nu	ımber: F020000	)05560	
	street address of the timent of State:	current registered ag	ent and registered	office on file with	the	
	DIGNAM, PATRICK D 14	408 NORTH WESTSHOR	E BLVD. SUITE 110 T	'AMPA FL 33607 US		
						ģ
6. The name and (if changed):	street address of the s	•	(if changed) and	/or registered office	÷ .	DOFEB 19 IM 10: 55
	2731 Executiv	e Park Drive,	Suite 4			至10
	Weston, FL	P.O. Box NOT acceptable) 33331				S
The street addre	ss of its registered of be identical.	fice and the street a	ddress of the bus	iness office of its r	registered ag	gent,
Such change wa authorized by th	s authorized by resole e board, or the corpo	ution duly adopted ration has been not	by its board of di ified in writing of	rectors or by an of f the change.	fficer so	
(Signatur	e of an officer or director)		Patrick Dignam	-Secretary ed or typed name and title	·)	
I hereby accept if further agree to find duties, and document is being corporation has	the appointment as r o comply with the pr d I am familiar with ng filed merely to ref peph notified in writ	egistered agent and ovisions of all statu and accept the oblig lect a change in the ing of this change.	agree to act in the tes relative to the ation of my posit registered office	nis capacity. proper and complition as registered a address, I hereby	lete perform agent. Or, i confirm tha	ance f this t the
Su (Sign	nature of Registered Agent)	<u> </u>	2	14/08 (Date)		
If signing on beh	nalf of an entity:					
Sean L. Eme		*****				
/T\	med or Printed Name)					

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