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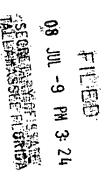
(Requestor's Name)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Duringer Entity Name)						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						





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07/09/08--01010--002 **35.00





COVER LETTER

TO: Amendment Section Division of Corporations SUBJECT: Navigation Electronics, Inc. (Name of Corporation)							
The enclos	sed Statement of Change of Registered Office/Ag	ent and fee are submitted for filing.					
Please retu	arn all correspondence concerning this matter to the	he following:					
	Brandon Tolle (Name of Contact	Bassa					
	(Name of Contact	resour					
Navigation Electronics, Inc. (Firm/Company)							
2500 Merchants Row Blvd. #114 (Address)							
	Talahassee, FL (City/State and Zi	32317 p Code)					
For further	information concerning this matter, please call:						
	Rrandon Tolle at (Name of Contact Person)	(_850-22)8-2070 (Area Code & Daytime Telephone Number)					
Enclosed is	s a \$35.00 check made payable to the Department	t 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					

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

Pursuant to the provisions of sec statement of change is submitted	l .			•
in order to change its r	egistered office or registere	ed agent, or both, in	the State of Flo	rida.
1. The name of the corporation:	Navigation Ele	ctroniès. I	nc.	
2. The principal office address:				
	Talahassee, FL	32317		
3. The mailing address (if different				
4. Date of incorporation/qualific	ation July 1, 1988	Document num	ber: 2005102	1006701
5. The name and street address of Florida Department of State:				
	Erin McCormick	·	·,	
<i>i</i>	1303 Laurel Dr	•		3 8
	Clearwater, FL	33756		JUL -
6. The name and street address o (if changed):	of the new registered agent (
	Brandon Tolle			မှု မှ
	2500 Merchants	Row Blvd.	#114	2
	(P.O. Box NOT acceptable) Talahassee, FL	32317		
The street address of its register as changed will be identical. Such change was authorized by authorized by the board, or the				, , ,
(octor)		Pache r typed name and title	
I hereby accept the appointmen I further agree to comply with to of my duties, and I am familiar document is being filed merely corporation has been notified to	t as registered agent and a he provisions of all statute with and accept the obliga to reflect a change in the r writing of this change.	, 1		ete performance igent. Or, if this confirm that the
(Signature of Registered	Agent)	6/17/0	(Date)	
If signing on behalf of an entity	:			
(Typed or Printed Name	o) <u> </u>			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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