

L55841

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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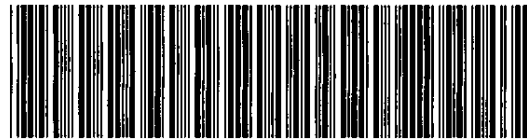
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DDR
12/30/13

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Circa Telecom U.S.A, Inc.
Name of Corporation

DOCUMENT NUMBER: L55841

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:

Ghada Skaff

Name of Contact Person

Lieser & Skaff

Firm/Company

511 W. Bay St., Suite 350

Address

Tampa, FL 33606

City/State and Zip Code

info@lieserskaff.com

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

For further information concerning this matter, please call:

Ghada Skaff

Name of Contact Person

at **813 280-1256**

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

**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: Circa Telecom U.S.A., Inc.
2. The principal office address: 6293 W. Linebaugh Ave. Tampa, FL 33625
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 03/08/1990 Document number: L55841
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)

Frederick James, LLC

600 Bypass Dr. Ste 112

Clearwater, FL 33764

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

Lieser & Skaff, P.L.

511 W. Bay St., Suite 350

P.O. Box NOT acceptable

Tampa, FL 33606

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.


Signature of an officer or director

Cory Tanagi, VP & CFO
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.


Signature of Registered Agent

December 13, 2013
Date

If signing on behalf of an entity:

Ghada Skaff
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

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