

6455 East Johns Crossing, Suite 285, Duluth, GA 30097 Phone (678) 775-2244 Fax (678) 775-2254

December 7, 2001

Division of Corporations PO Box 6327 Tallahassee, FL 32314 n-1817

R/A change

300004739963----12/26/01--01102--005 *****25.00 ******25.00

RE:

New Access Communications, LLC

Change of Registered Agent/Registered Office

To Whom It May Concern:

Enclosed please find the following:

1) Two copies of the appropriate Statement of Change of Registered Office or Registered Agent.

2) A check in the amount of \$35.00 in payment of Change of Agent Fees.

3) A postage-paid return envelope for use in returning a date stamped copy of the change application.

Please return a date stamped copy of the attached form to the address above.

Should you have any questions or need further information, please do not hesitate to call me directly. Thank you in advance for your assistance and cooperation.

Respectfully submitted,

Rh/annon Ludlow Compliance Analyst

OI DEC 26 PM 1:47 SECRETARY OF STATE

FILED

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the limited liability company is: New Access Communications, LLC 2. The mailing address of the limited liability company is: 6455 East Johns Crossing, Suite 200, Duluth, GA 30097 9/7/2000 M000001817 4. Document number 3. Date of filing/registration in Florida 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: **CT Corporation System** Name 1200 South Pine Island Road Address Plantation, FL 33324 City, State and Zip 6. The name and address of the new registered agent and/or office: TCS Corporate Services, Inc. Name 1406 Hayes Street, Suite #2 Florida street address (P.O. Box NOT acceptable) **Tallahassee** City, State and Zip If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member) (Printed or typed name of signée) 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 familian with and accept the obligations of my position as registered agent as provided for in Chapter 608, A.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereful confirm that the limited liability company has been notified in writing of this change. (Signature of Registered Agent)