DOCUMENT # PO100006267  1. Entity Name POINTEC ENTERPRISES, INC.						FILE 195-23-2002 90052 025150:00 P01000006267 02 OCT 22 AH II: 22			
Principal Pla	ace of Business	S	Mailing Address			SECRETATIV OF TALLAHASSEE, P	STATE LORIDA		
3224 GULF WINDS CIRCLE SPRING HILL FL 34607			3224 GULF WINDS CIRCLE SPRING HILL FL 34807			4UAIAU			
2. Principal	Place of Busin	<del>0</del> 89	3. Malling Address	<del></del>					
Suite, Apt. #, etc.  City & State			Suite, Apt. #, etc. City & State			DO NOT WRITE IN THIS SPACE  4. FEI Number 39-369162 0 Applied For Not Applied be			
					4.				
Zip		Country	Zip	Country	5,	Certificate of Status Desire		\$8.75 A	
	6. Name	and Address of Current R	egistered Agent	<del></del>	·	Name and Address of New	. –	Fee Requir	ed
		_		Name					
MASON, JOSEPH M JR. 101 SOUTH MAIN STREET			Street Addre		t Address (P.O.	s (P.O. Box Number is Not Acceptable)			
BROOKS	VILLE FL 346	01							
	<u></u>			City			FL	Zip Coo	de
8. The above	e named entity	submits this statement for t	the purpose of changing its	registered office	or registered ar	ent, or both, in the State of	Florida.		
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						gern er zend wy alle eitete er			•
SIGNATURE	Signature, typed o								<u>,</u>
SIGNATURE	Signature, typed o	r printed name of registered agent and	d title if applicable. (NOT	E: Registered Agent sign	nature required when r		DATE		<u> </u>
9. This corp	Signature, typed o		of title if applicable. (NOTI FILE NOW! After May 1, 20	E Registered Agent sign If FEE IS \$150 02 Fee will be :	nature required when r		DATE		OO May Be
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of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 11 or Block 12 if

SIGNATURE:

SIGNATURE:

| Contract | Contr