F00000005747

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COVER LETTER

	Amendment Section Division of Corporations			
SUBJECT: North County Communications Corporation				
	Name of C	orporation		
DOCUN	MENT NUMBER:F00	000005747		
The encl	losed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.		
Please re	eturn all correspondence concerning this matte	r to the following:		
	Lisa Granskie for Incorp			
	Name of Co	ntact Person		
		·		
InCorp Services, Inc. Firm/Company				
	Firm/C	ompany		
	375 N. Stephanie	Street · Suite 1411		
	Henderson N City/State a	V 89014-8909 nd Zip Code		
	E-mail address: (to be used for	nccom.com uture annual report notification)		
		•		
For furth	ner information concerning this matter, please	call:		
	Lisa Granskie	at 702-866-2500		
	Name of Contact Person	at 702-866-2500 Area Code & Daytime Telephone Number		
Enclosed	d is a \$35.00 check made payable to the Depar	tment of State.		
	Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section 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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Flostatement of change is submitted for a corporation organized under the laws of the Statement in order to change its registered office or registered agent, or both, in the Statement	te of California
1. The name of the corporation: North County Communications Corpo	ration
2. The principal office address: 4008 Taylor St, San Diego, CA 92110	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 10/12/2000 Document number:	F00000005747
 The name and street address of the current registered agent and registered office on f Florida Department of State: (If resigned, enter resigned) NRAI SERVICES, INC. 	file with the
2731 EXECUTIVE PARK DRIVE Suite 4	<u></u>
Weston, FL 33331	a 2
6. The name and street address of the new registered agent (if changed) and /or register (if changed):	至 自己 第 .
InCorp Services, Inc.	
17888 67th Court North P.O. Box NOT acceptable	FLOOR T
Loxahatchee, FL 33470	SS SS
The street address of its registered office and the street address of the business offic as changed will be identical.	e of its registered agent,
Such change was authorized by resolution duly adopted by its board of directors or authorized by the board, or the corporation has been notified in writing of the change	by an officer so ge.
Signature of arrotticer or director TOOD GSSER Printed or typed nam	
I hereby accept the appointment as registered agent and agree to act in this capacit I further agree to comply with the provisions of all statutes relative to the proper an of my duties, and I am familiar with and accept the obligation of my position as reg document is being filed merely to reflect a change in the registered office address, I corporation has been notified in writing of this change.	ty. nd complete performance istered agent. Or, if this I hereby confirm that the
Signature of Registered Agent Date	, 2010
If signing on behalf of an entity:	
Lisa Granskie on behalf of InCorp Services, Inc.	

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

Typed or Printed Name