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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Mh -17-11

COVER LETTER

TO: Amendment Section Division of Corporations						
SUBJECT: Wire 2 Wire Communications Cabling Co. Name of Corporation						
DOCUMENT NUMBER: P100000 44534						
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:						
Toe Leonard, Name of Contact Person						
Wire 2 Wire Company Cably Co.						
8319 Dynesty Dr. Address						
Boca Raton FC 33433 City/State and Zip Code						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Toe Leonard at (954) 914-8113 Name of Contact Person 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

statement of chang	ge is submitted for	ns 607.0502, 617.0502, r a corporation organize stered office or registere	ed under the lav	vs of the State o	of Florida	
1. The name of the	e corporation:	Ws enly	ire Co	mmunical	n'ans Cabl.	م له .
2. The principal of	ffice address:	8319 D	perp	Dr.	33433	<u> </u>
3. The mailing add	dress (if different)					
4. Date of incorpo	ration/qualification	on: 5 24 10	Document	number: <u>P</u>	000000	t4231
		ne current registered age esigned, enter resigned)		d office on file	with the	
-	Res	igned - K	yle La	x verdo	<u> </u>	
_	USA-K	LA LCC -	841 b	rodention	il Or.	
_	15 th E	Floor Ja	cksonn	le, FC	3352Q	}
6. The name and s (if changed):	treet address of the	ne new registered agent, , Leonard,	(if changed) and	d /or registered	JUN 17	
_	8319	Dynest	Dr.			7
_	Boca	Raton	ecceptable PC	3343	99ATE 20	
The street address as changed will b	s of its registered e identical.	office and the street ac	idress of the b	usiness office o	of its registered as	gent,
Such change was authorized by the	authorized by re board, or the cor	solution duly adopted l poration has been noti	by its board of fied in writing	directors or by of the change.	an officer so	
Signature	ion (in officer or director			led or typed name ar	conardi	Pres
I hereby accept the light further agree to of my duties, and document is being corporation has be	ne appointment a comply with the I am familiar wi g filed merely to Seen hotified in w	s registered agent and provisions of all statut th and accept the oblig reflect a change in the riting of this change.	agree to act in es relative to ti ation of my po registered offic	this capacity. he proper and c sition as registe se address, I he	complete perform ered agent. Or, i reby confirm tha	ance f this t the
Signa	ture of Registered Age	nt		5 - 29 - Date	11	
If signing on beha	alf of an entity:					
Joe 1	_eonard	<u>li</u>				

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