Division of Corporations

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Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850) 922-4000

Account Name : FUZION WIRELESS COMMUNICATIONS, INC.

Account Number : I20000000228

- : (561)995-8480

Fax Number

: (561)995-8481

REGISTERED AGENT CHANGE

FUZION TELECOM, INC.

Certificate of Status	0
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10-23-00

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

the State of .	Florida.		stered office or registered agent, or both, in	
I. The name	e of the corporation : Fuzion	Telecom, Inc.		
2. The maili	ng address of the corporation	on : 5255 North Federa	l Highway, Suite 300, Boca Raton, FL 33487	<u> </u>
3. Date of in	ncorporation/qualification:	May 11, 2000	Document number: F00000002739	
4. The name	and address of the current	registered agent and		
	Larry T. Schone			
	5255 North Federal Highw	ay, Suite 300	_	
	Boca Raton, FL 33487		OO I	, .
5. The name	and address of the new reg	istered agent (if chan P. O. Box Not Accep	ged) and/or registered office (if changed)	-17
	Douglas E, Gonano	. O. Box Not Accep	ASSI	ş
	5255 North Federal Highw	ray Suite 300	me B	
	Boca Raton, FL 33487	47, 5010 500	STA:	
The street ac		ce and the street add	ress of the business office of its registered	
			its board of directors or by an officer so	
authorized b	y the board.	,	and of discours of by an officer so	
(Signat	ture of an officer, chairman or vice	chairman of the board)	October 20, 2000 (Date)	·*
DAVID L. FR.	ANK, PRESIDENT		• •	
	(Printed or typed name ar		·	4
riaving been corporation, I further agr performance registered ag	named as registered agen I hereby accept the appoint ee to comply with the prove to of my duties, and I am fan gent.	t and to accept servi itment as registered isions of all statutes niliar with and accep	ce of process for the above stated agent and agree to act in this capacity. relative to the proper and complete of the obligation of my position as	
	(Signature of Registered Agent)		October 20, 2000 (Date)	
lf signing on be	chalf of an entity:		(Daily)	
DOUGLAS E	GONANO	_	REGISTERED AGENT	
	(Typed or Printed Name)		(Capacity)	
	***	FILING FEE: \$35.0	00 * * *	
CR2E045(9/00)	Division of Corporations	P.O. Box 6327	TALLAHASSEE, FL 32314	
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