

F00000000 2820

No Boundaries Network
Requester's Name

6639 Southpoint Parkway, Ste. 104
Address

Jacksonville, FL 32216
City/State/Zip Phone #

No Return

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #) **500004439585--8**
-06/25/01--01114--011
2. _____
(Corporation Name) (Document #) *******35.00 *****35.00**
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

FILED
01 JUN 25 PM 1:30
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

PA d9
106
6/28

Examiner's Initials

**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, Florida Statutes, the undersigned corporation organized under the laws of the State of DELAWARE 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 corporation : NO BOUNDARIES NETWORK, INC.
2. The mailing address of the corporation : 6639 SOUTHPOINT PARKWAY, STE 104
JACKSONVILLE, FL 32216
3. Date of incorporation/qualification: JUNE 11, 1999 Document number: F00000002820
4. The name and address of the current registered agent and office:

ROBERT G. HALL
6639 SOUTHPOINT PARKWAY, STE 104
JACKSONVILLE, FL 32216

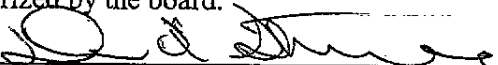
5. The name and address of the new registered agent (if changed) and/or registered office (if changed):
(P. O. Box Not Acceptable)

BRIAN G. BARNES
6639 SOUTHPOINT PARKWAY, STE 104
JACKSONVILLE, FL 32216

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TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.


(Signature of an officer, chairman or vice chairman of the board)

JUNE 20, 2001
(Date)

DENNIS K. STEMMLER
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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 familiar with and accept the obligation of my position as registered agent.


(Signature of Registered Agent)

JUNE 20, 2001
(Date)

If signing on behalf of an entity:

BRIAN G. BARNES
(Typed or Printed Name)

C.I.O
(Capacity)

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