F00000004271

(Requestor's Name)					
(Address)					
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(Business Entity Name)	_				
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10 SEP 27 PH 2: L7

RA. Charge C.COULLIETTE

EXAMINER

SEP 28 2010

COVER LETTER

TO: Amendment Section Division of Corpora	i tions				
SUBJECT:	Spatial Network	ks, Inc			
	Name of Corp	oration			
DOCUMENT NUMBER:	F0000	0004271			
The enclosed Statement of C	Change of Registered Office/A	gent and fee are submitted for filing.			
Please return all correspond	ence concerning this matter to	the following:			
,	<u> </u>				
	Gus Gar	cia			
Name of Contact Person					
	Spatial Netwo	rks, Inc.			
	Firm/Comp	any			
	18167 US Hwy 19	9 N, Ste 240			
	Address	3			
	Clearwater, F	L 33764			
	City/State and 2	Zip Code			
	gus@spatialnetw	rorks com			
E-mail	address: (to be used for futu	re annual report notification)			
	•	•			
For further information cond	cerning this matter, please call:	:			
Gus	Garcia ,	st (727) 538-0545			
Name of Cor	ntact Person	at (727) 538-0545 Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check	made payable to the Departme	nt of State.			
<u>Ma</u> An	iling Address: nendment Section	Street Address: Amendment Section			
	vision of Corporations	Division of Corporations			
	D. Box 6327	Clifton Building			
Tal	lahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

TO:

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

1

statement of cha	nge is submitted for a co	rporation organize	607.1508, or 617.1508, Floo ed under the laws of the State d agent, or both, in the State	_{e of Delaware}
1. The name of t	he corporation: Spatia	al Networks, I	nc	
	office address: 18167	US Hwy 19 N S	Ste 240	
	r, FL 33764			•
3. The mailing a	ddress (if different): <u>gu</u>	s@spatialnetwo	orks.com	
4. Date of incorp	poration/qualification:	7/24/2010	Document number:	F00000004271
	street address of the cur tment of State: (If resign		nt and registered office on fi	le with the
	Barry C Powers			
	18167 US Hwy 19	N Ste 240		
	Clearwater, FL 337	764		7
6. The name and (if changed):	street address of the nev	v registered agent (if changed) and /or registere	10 SEP 27 PH 2: 4
	Gus Garcia			CORP
	18167 US Hwy 19			75 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		P.O. Box NOT a	cceptable	ATIC 47
	Clearwater, FL 337	64		<u> </u>
The street addre	ess of its registered offic be identical.	e and the street ad	dress of the business office	e of its registered agent,
Such change wa authorized by th	as authorized by resolut ne board, or the corpora	ion duly adopted b	y its board of directors or lied in writing of the chang	by an officer so e.
XIA			Tony Quarta	raro CEO
\1//	re of an officer or director		Printed or typed name	e and tille
I herdby accept I further agree to of mydutles, an document is bei corporation has	the appointment as reg to comply with the prov. d I am familiar with an ng filed merely to reflect been notified in writing	istered agent and listoris of all statuted accept the obligate a change in the igo of this change.	agree to act in this capacit es relative to the proper an ation of my position as regi registered office address, I	y, d complete performance istered agent. Or, if this hereby confirm that the
1		_	9/23/1	0
Sign	nature of Registered Agent	<u>.</u>	Date	
If signing on be	half of an entity:			
Т	yped or Printed Name			