## F01000001752

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(Requestor's Name)	
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(City/State/Zip/Phone #)	<del></del>
PICK-UP WAIT	MAIL
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ALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Live Wire Communications, Inc.
(Name of corporation)
DOCUMENT NUMBER: F01000001752
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:
3 ···· 3 ··· 4 ···
Carol McCollum
(Name of person)
Live Wire Communications, Inc.
(Name of firm/company)
828 Ralph McGill Blvd Suite 318
(Address)
Atlanta, GA 30306
(City/state and zip code)
For further information concerning this matter, please call:
Carol McCollum at ( 404 ) 525-0940
Carol McCollum at (404 ) 525-0940 (Name of person) (Area code & daytime telephone number)
( Law cold to day take to be provided in the cold to t
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Street Address:
Amendment Section Amendment Section
Division of Corporations P.O. Box 6327  Division of Corporations 409 E. Gaines Street
Tallahassee, FL 32314 Tallahassee, FL 32399

5 244

CR2E045(09/03)

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

	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statu nitted for a corporation organized under the laws of the State of _DELAWARE	ites, ti		nent q in ord	_
	egistered office or registered agent, or both, in the State of Florida.				
1. The name of	f the corporation: LIVE WIRE COMMUNICATIONS, INC.	:			.2.
	al office address: 828 RAPLH MCGILL BLVD SUITE 318, ATLANTA GA 30306				
				2.4.1-	
3. The mailing	address (if different): (SAME)				
	<u> </u>	<del></del>	•	<u>:</u>	<u>.</u>
4. Date of inco	proporation/qualification: 03/30/0001 Document number: F010000017	752			
	nd street address of the current registered agent and registered office on file with the artment of State:	ie			
	CORPORATION SERVICES COMPANY				
	1201 HAYS STREET		·		u i
	TALLAHASSEE, FL 32301		, :		uł.
6. The name an (if changed):	nd street address of the new registered agent (if changed) and /or registered office:		ĪĀ	_	
	CHUCK HIGGINS		LCK	# #	and and
	9920 NW 62ND LANE	<u> -</u>	HAS	<b>Ξ</b>	
	(P.O. Box or personal mailbox NOT acceptable)		SEE	7	-
	GAINESVILLE, FL 32606		FS.	<b>A</b> 9	111
The street addichanged will b	ress of its registered office and the street address of the business office of its repe identical.	gister	OF Them		<u> </u>
Such change withe board, or the	was authorized by resolution duly adopted by its board of directors or by an off he corporation has been notified in writing of the change.	icer s	o author.	ized b	У
Carell	A. M. E. Ollus (Signature of an officer of director) - VP. Corp. of after (Printed of typed name	OR	ration	<u>15</u>	
duties, and I a being filed mei	ot the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and comple In familiar with and accept the obligation of my position as registered agent. (I wely to reflect a change in the registered office address, I hereby confirm that the in writing of this change.	te per Or, if he co	rformane this doc rporatio	ce of r umeni n has	ny : is
C	(Signature of Registered Agent) (Date)	40			
<u></u>	(Signature of Registered Agent) (Date)				
If signing on b	pehalf of an entity:				
		. ·	<u> </u>		·
	(Typed or Printed Name) (Capacity	<i>(</i> )			

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