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T BROWN MAR 1 1 2004

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Sepel Servizi Per L'Elettronic INC. (Name of corporation)
DOCUMENT NUMBER: FO10000 3505
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:
Hathy Romick (Name of person)
Sepel Servizi Per L'ELettronic Inc. (Name of firm/company)
773 S. Kirkman Rd Swite 112
Ovlando FL 32811 (City/state and zip code)
For further information concerning this matter, please call:
Kathy Romick at (407) 523-1612 (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 409 E. Gaines Street Tallahassee, FL 32399



March 1, 2004

KATHY ROMICK SEPEL SERVIZI PER L'ELETTRONICA, SRL 773 S. KIRKMAN ROAD, SUITE 112 ORLANDO, FL 32811

SUBJECT: SEPEL SERVIZI PER L'ELETTRONICA, SRL

Ref. Number: F01000003505

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the **complete document**, including the <u>electronic filing cover sheet</u>.

The current name of the entity is as referenced above. Please correct your document accordingly.

The document must have original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6869.

Letter Number: 904A00013605

Teresa Brown Document Specialist

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

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: SEPEL SERVIZI PER L'ELETT RUNICA, SEC. 2. The mailing address of the corporation: M3 S. Kirkman Rd Ste 112 Orlando FL 32811 3. Date of incorporation/qualification: 06/28/2001 Document number: F0100003505 4. The name and address of the current registered agent and registered office: Lindy Dameron Orlando FL 32811 5. The name and address of the new registered agent (if changed) and /or registered office (if changed): M3 S. Kirkman Rd Ste 112 Chando FL 32811 Orlando FL 32811
1. The name of the corporation: SEPEL SERVIZI PER L'ELETTRUNICA, SRC 2. The mailing address of the corporation: 173 S. Kirkman Rd Ste 112 Orlando FL 32811 3. Date of incorporation/qualification: 06/28/2001 Document number: F010000350 5 4. The name and address of the current registered agent and registered office: Lindy Danter 1 773 S. Kirkman Rd Ste 112 Orlando FL 32811 5. The name and address of the new registered agent (if changed) and /or registered office (if changed): 17 (P.O. Box NOT Acceptable) Rathy Ramick Ste 112
Or lando FL 32811 3. Date of incorporation/qualification: O6/28/200 Document number: F010000350 5 4. The name and address of the current registered agent and registered office: Lindy Dameron 773 S. Kirkman Rcl Ste 112 Orlando FL 32811 5. The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed) and /or
3. Date of incorporation/qualification: OG 28 200 Document number: F0100003505 4. The name and address of the current registered agent and registered office: \[\begin{align*} \leftarrow \text{Quarters} \\ \text{Orlands} \quarter \text{Kirkman Rcl Ste 112} \\ \text{Orlands} \quarter \text{Aby Romicle} \\ \text{(P.O. Box NOT Acceptable)} \\ \text{Value of incorporation/qualification: \text{Document number: F0100003505} \\ \text{Aby Romicle} \\ \text{Orlands} \quarter \text{Romicle} \\ \text{Orlands} \quarter \text{Romicle} \\ \text{NOT Acceptable} \\ \
Lindy Dameron 773 S. Kirkman Rd Stell2 For Stell2 Orlands FL 32811 5. The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed) and /or registered agent (if changed) and /or regist
Lindy Dameron 773 S. Kirkman Rd Stell2 For Stell2 Orlands FL 32811 5. The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed): The name and address of the new registered agent (if changed) and /or registered office (if changed) and /or registered agent (if changed) and /or regist
5. The name and address of the new registered agent (if changed) and /or registered office (if changed): 17 (P.O. Box NOT Acceptable) Kathy Romick 173 S. Kirkman Rd Stell2
1/1/1000100011111111111111111111111111
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) (Date)
Pertini Giarefranco - Director (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) If signing on behalf of an entity:
. (Typed or Printed Name) (Capacity)

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

P.O. Box 6327

TALLAHASSEE, FL 32314

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DIVISION OF CORPORATIONS