F0300002740

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PICK-UP WAIT MAIL	
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Special Instructions to Filing Officer:	
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FILED 04 MAY 28 AM 10: 48 SECRETARY OF STATE TALLAHASSEE, FLOROW

G. Consiliante MAY 2 8 2004

CORPORATE						····
ACCESS,	236 E	ast 6th Avenue	. Tallahassee, Fl	orida 32303		
	ux 37066 (32315	-7066) ~ (850) 222-2666 or	(800) 969-166	6 . Fax (850)	222-1666
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, Nextag, Inc. (CORPORATE NAME & DOCUMENT #)		· · · · · · · · · · · · · · · · · · ·				,
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SPECIAL INSTRUCTIONS	.		<u></u>			
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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, this statement of change is submitted for a corporation organized under the laws of the State of \underline{DrRMm} in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Nextag, InC.
2. The principal office address: 1300 Soluth El Crimino Deal, Suite 600 San Mater, Ca 94402
3. The mailing address (if different): <u>AMC AS Above</u>
4. Date of incorporation/qualification: 01/04/99 Document number: F0300002740
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
NRAI Services, Inc.
5210 E. Park AVEnue
Tallahassee, FL 32301 Pg ?
6. The name and street address of the new registered agent (if changed) and /or registered office
<u>A331 HANGEN Place</u> (P.O. Box or personal mailbox NOT acceptable)
Tallahassee, EL 32301
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, or the corporation has been notified in writing of the change.

mbler (Signature of an officer or directo

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

(Signature of Register d Agent)

If signing on behalf of an entity:

1.

DAUE TAYLOR 1

(Typed or Printed Name)

(Date)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314