F05000038/6

(Address)	100162757441			
(City/State/Zip/Phone #) PICK-UP WAIT MAIL	11/16/0901023006 **35.00			
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	200 FALL			
Special Instructions to Filing Officer:	SECRETARY OF STATE ALLAHASSEE, FLORIDA			
Office Use Only Marketine				

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	DIALTONE & M			
	Name of C	Corporation		
DOCUMENT NUM	BER:F05	5000003816		
The enclosed Stateme	nt of Change of Registered Offic	e/Agent and fee are submitted for filing.		
Please return all corre	spondence concerning this matter	r to the following:		
	Name of Co	near Dean-		
	Regulatory and Tax C Sherry Gale	Consultants, LLC		
_	450 Old Peachtree Ro	oad NW		
Suite 101A				
	Suwanee, GA 30024			
_	Add	ress		
	City/State ar	nd Zip Code		
	mail address: (to be used for f	uture annual report notification)		
_		and animal report notification,		
For further information	n concerning this matter, please o	nall:		
1 of tartifor information	ir concerning and matter, prease (· · · · · · · · · · · · · · · · · · ·		
	CC + P	at () Area Code & Daytime Telephone Number		
Name	of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 c	heck made payable to the Depart	tment of State.		
	Mailina Address	Street Address:		
	Mailing Address: Amendment Section	Street Address: Amendment Section		
	Division of Corporations	Division of Corporations		
	P.O. Box 6327	Clifton Building		
	Tallahassee FI 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Floric ange is submitted for a corporation organized under the laws of the State or er to change its registered office or registered agent, or both, in the State or	of Geo	rgia	<u></u>	
1. The name of	the corporation: DIALTONE & MORE, INC.				
	office address: 11121 HWY 70, STE 202				
Arlington ⁻					
3. The mailing a	address (if different):				
4. Date of incorp	poration/qualification: 06/30/2005 Document number:	F050	000038	316	
	d street address of the current registered agent and registered office on file rtment of State: (If resigned, enter resigned)	with the	e		
	TCS CORPORATE SERVICES, INC.				
	515 East Park Ave		TAL	200	
	Tallahassee FL 32301 US	 -	HAT.	2009 HOV 1	t1 -4"
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered	office	TARY OF ASSEE.	9	
	Incorp Services, Inc.		1.S.	PM IO:	
	17888 67th Court North		REA	: 17	
	P.O. Box NOT acceptable Loxahatchee, FL 33470				
The street address changed will	ess of its registered office and the street address of the business office of be identical.	of its reg	gistered a	gent,	
_	as authorized by resolution duly adopted by its board of directors or by he board, or the corporation has been notified in writing of the change.	an offi	cer so		
8ignatu	re of an officer of director Printed or typed name a	na title /	<u>_</u>	50	
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and id I am familiar with and accept the obligation of my position as regist no filed merely to reflect a change in the registered office address, I have been notified in writing of this change.	complet ered ag ereby co	e perforr ent. Or, onfirm the	nance if this at the	
Janice	nature of Registered Agent Incorp Services, Inc., Date	-/09			
If signing on be	chalf of an entity:				
Janice Null o	n behalf of Incorp Services, Inc.				

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

Typed or Printed Name