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Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCAC00000023 Phone : (850)222-1092 Fax Number : (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

REGISTERED AGENT CHANGE ABI NETWORK SOLUTIONS, INC.

Certificate of Status	0
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Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

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OCT 2 7 2014

T. CARTER

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, Florida Statutes, this age is submitted for a corporation organized under the laws of the State of $\frac{DE}{E}$
in order	to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: AMERICAN BROADBAND, INC. (dba ABI NETWORK SOLUTIONS, INC.)
2. The principal of CARROLLTO	
3. The malling a	ddress (if different):
4. Date of incorp	oration/qualification: 06/22/2007 Document number: F07000003217
5. The name and	street address of the current registered agent and registered office on file with the treet of State: (If resigned, enter resigned)
	NATIONAL CORPORATION RESEARCH, LTD, INC
·	155 OFFICE PLAZA DRIVE
•	TALLAHASSEE, FL 32301
6. The name and (if changed):	street address of the new registered agent (if changed) and for registered office
	C T Corporation System
	c/o C T Corporation System, 1200 South Pine Island Road
	P.O. Box NOT ecceptable Plantation, Florida 33324
The street addre	ss of its registered office and the street address of the business office of its registered agent be identical.
Such change was authorized by th	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
al Co	Marc St. Pierre - Secretary & Power of Attorney
- 6	the appointment as registered agent and agree to act in this capacity. the appointment as registered agent and agree to act in this capacity of complete or comply with the provisions of all statutes relative to the proper and complete my daties, and I am familiar with and accept the obligation of my position as registered a document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
C T Corr	poration System 1D 23/14
If signing on be	Marc St. Plerre View President and Assistant Secretary
<u>1</u>	ped of Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)