F0800000168

(Requestor's Name)						
(Address)						
•						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
Special instructions to Filing Officer.						

Office Use Only



400209815404

RECEIVED

RECEIVED

RECEIVED

RECEIVED

REPARTMENT OF STATE

2011 JUL 25 AM 10: 46

2011 JUL 25 AM 10: 46

ROT HAYEHDED

ELIEPICIENCY OF FILMS

R.A.Chg C.COULLIETTE

JUL 25 2011

EXAMINER

11 JUL 25 PM 1:05



)N SERVICE COMPANY.	ACCOUNT NO.			
	REFERENCE	:	848472	7664384
	AUTHORIZATION	:C	Mull OCE	nan
	COST LIMIT	:	\$ 35.00	
ORDER DATE :	-			
ORDER NO. :				
CUSTOMER NO:	7664384			

NAME: GREENLINK NETWORKS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd

EXAMINER'S INITIALS:

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

statement of ch	ange is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, the organized under the laws of the State of Delaware registered agent, or both, in the State of Florida.		_
1. The name of	the corporation: GREENLINK N	NETWORKS, INC.		
		Ln, Suite 106, Wayne PA 19087		
3. The mailing	address (if different): 16130 Ventu	ura Blvd, Suite 250, Encino CA 91436		
4. Date of incom	rporation/qualification: 01/11/200	Document number: F08000000168		
	d street address of the current regist artment of State:	tered agent and registered office on file with the		
	CT Corporation System			
	1200 South Pine Island Rd			200
	Plantation FL 33324		1 JUL 25	
6. The name an (if changed):		ed agent (if changed) and /or registered office	25 PM	
	Corporation Service Compan	у	=:0	
	1201 Hays Street		<u>M</u>	
	(P.O. Box NOT ac	ceptable)		
	Tallahassee, FL 32301			
The street addrass changed wil	ress of its registered office and the l be identical.	street address of the business office of its registere	ed ager	ıt,
Such change wathorized by t	as authorized by resolution duly a he board, or the corporation has b	dopted by its board of directors or by an officer so)	
M	Jauren Cothed	Maureen Cathell, Vice President		_
(Signal	ure of an officer of director)	(Printed or typed name and title)		
I further agree of my duties, a document is be corporation ha	t the appointment as registered ag to comply with the provisions of to am familiar with and accept to ing filed merely to reflect a chang is been notified in writing of this co ion Scrvice Company	ent and agree to act in this capacity. Ill statutes relative to the proper and complete per, he obligation of my position as registered agent. (e in the registered office address, I hereby confirm hange.	forman Or, if ti ı that tı	ıce his he
By: \(\(\)		07/18/2011		
	ignature of Registered Agent)	(Date)		-
If signing on b	ehalf of an entity:			
Sylvia Quepp	pet, Asst. VP			
(Typed or Printed Name)			

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