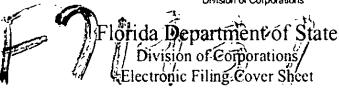
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000000682 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

**Enter	the	email	address	for	this	busin	ess	entity	to	be	used	for	futui	^e
a	nnual	report	t mailin	gs.	Enter	only	one	email	add	res:	s ple	ase.	• •	-

Email	Address:	
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REGISTERED AGENT CHANGE **NEW GENERATION COMPUTING, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

O SIMMONS

Electronic Filing Menu

Corporate Filing Menu

COVER LETTER

TO:

Amendment Section Division of Corporations

New Generation Computing, Inc.

F71937

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:

Mary Castillo

Name of Contact Person

Registered Agent Solutions, Inc.

Firm/Company

1701 Directors Blvd., Suite 300

Address

Austin, TX 78744

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

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** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

statement of ch	provisions of sections 607.0502, ange is submitted for a corporation	on organized under the	laws of the State o	Florida	
1. The name of 2. The principal	the corporation: New General office of the corporation: New General office address: 14900 NW LAKE, FL 33016	eration Compu	ting, Inc.	y rioriaa.	
3. The mailing	address (if different):			•	
4. Date of incor	poration/qualification: 3/11/1	982 Docume	nt number: F71	937	
	d street address of the current regurtment of State: (If resigned, ente	r resigned) TON SYSTE		with the	
	PLANTATION	ND ROAD FL	33324	SECRETATALLA	~ ~ ~1
6. The name an (if changed):	d street address of the new register Registered Agent		Ū	HARY	
	155 Office Plaza	 	Α	AM 10: 42 OF STATE SSEE, FL	O
	Tallahassee	Box NOT acceptable FL 323	301		
The street addr as changed wil	ess of its registered office and the identical.	e street address of the	business office of	its registered agent,	
	ras authorized by resolution duly he board, or the corporation has			in officer so	
	ent Klinges ure of an other or director		Klinges	CFO	
I further agrae performance of agent. Or, if th	t the appointment as registered a to comply with the provisions of f my duties, and I am familiar wi his document is being filed merel that the corporation has been n	all statutes relative to th and accept the oblig v to reflect a change in	the proper and co ation of my positi the registered of	omplete ion as registered fice address, l	
Hode	engu H	12/05/20	019 Date		
If signing on bo	chalf of an entity:				
Mackenzie l	Hart - Assistant Secretary	+			

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

Typed or Printed Name