

F95000003148

100 return address

(Requestor's Name)



AmTel | ATN, Inc.
913 Dilworth Street
St. Marys, GA 31558

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

03/07/05--01032--016 **35.00

R.A. Charge

C. Coulllette APR 04 2005



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

March 11, 2005

ATN, INC.
913 DILWORTH ST.
ST. MARYS, GA 31558

SUBJECT: AMTEL NETWORK, INC.
Ref. Number: F95000003148

We have received your document for AMTEL NETWORK, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You have used the wrong form to file your change of registered agent. I have enclosed the correct form for you.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Document Specialist

Letter Number: 205A00016967

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ATN, Inc. d/b/a Amtel Networks, Inc.
(Name of corporation)

DOCUMENT NUMBER: _____

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:

Gordon R. Reilly
(Name of contact person)

ATN, Inc.
(Firm/Company)

913 Dilworth Street
(Address)

St. Marys, GA 31558
(City/state and zip code)

For further information concerning this matter, please call:

Denise Harrison at (912) 673-6000
(Name of contact person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

RECEIVED
05 MAR 91 AM 8:33
DIVISION OF CORPORATIONS

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

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 GA in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: ATN, Inc. / AMTEL NETWORK, INC.
- 2. The principal office address: 913 Dilworth Street
St. Marys, GA 31558
- 3. The mailing address (if different): _____

4. Date of incorporation/qualification: 06-29-1995 Document number: F95000003148

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Gordon R. Reilly
85150 St. Thomas Street
Yulee, FL 32697

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TALLAHASSEE, FLORIDA

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

(P.O. Box NOT acceptable)

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.

Gordon R. Reilly
(Signature of an officer or director)

Gordon R. Reilly, President
(Printed or typed name and title)

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.

Gordon R. Reilly
(Signature of Registered Agent)

03/25/2005
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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