

Document Number Only

F960000002594

C T Corporation System

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301

City

State

Zip

Phone

CORPORATION(S) NAME

800002822398--2

-03/30/99-01001--011

*****35.00 *****35.00

Claricom, Inc

RA
Change

- ☐ Profit ☐ Amendment ☐ Merger
- ☐ NonProfit ☐ Dissolution/Withdrawal ☐ Mark
- ☐ Limited Liability Company ☐ Other
- ☐ Foreign ☐ Annual Report ☒ Change of R.A.
- ☐ Limited Partnership ☐ Reservation ☐ Fictitious Name
- ☐ Reinstatement ☐ Photo Copies ☐ CUS
- ☐ Limited Liability Partnership ☐ Call When Ready ☐ Call if Problem ☐ After 4:30
- ☐ Certified Copy ☒ Walk In ☐ Will Wait ☒ Pick Up
- ☐ Mail Out

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TALLAHASSEE, FLORIDA

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THANKS
JOEY

Florida Department of State, Jim Smith, Secretary of State

**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, the undersigned corporation organized under the laws of the State of Delaware submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: Claricom, Inc.

1b. Date of incorporation May 23, 1996 Document number F9000002593

2. The name and address of the current registered agent and office:

Corporation Service Company

1201 Hayes St., Tallahassee, FL 32301

3. The name and address of the new registered agent and office:
(P.O. Box Not Acceptable)

C T CORPORATION SYSTEM

c/o C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation Florida 33324

The street address of its registered agent 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.

Amy Berteletti

SIGNATURE

March 22, 1999

DATE

Amy Berteletti, Asst. Secretary
(Type or printed name and title)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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.

SIGNATURE BY: *Salvina Amenda-Gray*

Salvina Amenda-Gray (Registered Agent) Assy. Secy.

DATE March 22, 1999

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (7-91)

Filing Fee: \$35.00