

FOR TOMORROW 4417137154 518364 58 CLOND 17 (34769)					
(Oity/States/Eight Holls //)					
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(Business Entity Name)					
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is:		WIRED FOR TOMMORROW LLC		
		mpany is: 3107 13TH STRE		
ST. CLOUD, FLORIDA				·
8/25/2000		L00000010257	· · · · · · · · · · · · · · · · · · ·	·
3. Date of filing/registration in Florida		4. Document num		
J. Date of mingregistran	on in Plonda	4. Document num		
5. The name of the register Florida Department of S	State:	ered office address as shown o	n the records of th	e
	NOELLE MARQUEZ			
	13537 TETHERLINE	Name E TRAIL		
Address ORLANDO, FL 32837				
		State and Zip		
6. The name and address o	•	•		
	ROBERT G. WILBU	RN		
•	1384 EMERALD DR	ive		
-	Florida street address	(P.O. Box NOT acceptable)	F.	
	KISSIMMEE	FL 34744		1,200 1,100 2,100 2,100
•	City, Sta	te and Zip		
Confirmed that after the cha	ange or changes are mad	ider the laws of the State of Fl. de, the Florida street address o be identical. Or, in the case o hange(s) was/were authorized otherwise provided in the arti npany.	f the registeral off	Gam.
Signature of a member or authorize	ed representative of a member)			
ROBERT G. WILBURN				
(Printed or typed name of signee)				
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if the address I hereby confirm to	tment as registered age of all statutes relative to accept the obligations of the comment is being fill that the limited liability	nt and agree to act in this cap to the proper and complete per of my position as registered ag ed to merely reflect a change i company has been notified in t	acity. I further ag formance of my di ent as provided fo n the registered of writing of this cha	ree to uties, or in fice nge.
Signature of Registered Agent)				

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

INHS18(10/99)

FILING FEE: \$25.00