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Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 (850) 245-6051

RE: Change of F.I.N. and Address for TEC-LINK LLC

The new Federal Identification Number for Tec-Link LLC is 20-1682963. Also, please note the new phone, mailing and physical address change below. If you have any further questions or concerns, please contact me at:

Mailing:

TEC-LINK LLC Attn: Derek C. Holmes, Sr. P.O. Box 48942 Tampa, FL 33647 (800) 664-0087 toll free (813) 929-3222 office (813) 929-3202 fax

Physical:

TEC-LINK LLC Attn: Derek C. Holmes, Sr. 20026 Bluff Oak Blvd Tampa, FL 33647 (800) 664-0087 toll free (813) 929-3222 office (813) 929-3202 fax

Sincerely, WRR.

Derék C. Holmes, Sr. Tec-Link, Principal

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:	TEC-LINK, LLC

2. The mailing address of the limited liability company is : P.O. BOX 48942, TAMPA, FL 33647

AUGUST 20, 2003

3. Date of filing/registration in Florida

L03000031587 4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

	DEREK C. HOLMES, SR	
	Name 18436 BRIDLE CLUB DRIVE	
	Address TAMPA, FL 33647	2004 TA
	City, State and Zip	For B T
6. The name and a	ddress of the new registered agent and/or office:	ALLE T-5
	DEREK C. HOLMES, SR	SEE PH
-	20026 BLUFF OAK BLVD	URATIC FLORIN
	Florida street address (P.O. Box NOT acceptable)	10 A GIN
	TAMPA FL 33647	-

City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

(Signature of a member or authorized representative of a member)

DEREK C. HOLMES, SR

(Printed or typed name of signee)

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 autics, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the timited liability company has been notified in writing of this change.

(Signature of Registered Agent)

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

FILING FEE: \$25.00