Division of Corporations



Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

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Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Wumber : 110432003053

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1 of 2

5/7/14 11:28 AM

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

1. The name of the limited liability company is: Service	NET Exp, LLC	
2. (a) Principal office address of the limited liability comapny:	4545 36th Succi	
(Note: MUST BE STREET ADDRESS)	Orlando FL 32811	
(b) Mailing address of limited liability company:	4545 36th Street	
(Note: MAY BE POST OFFICE BOX)	Orlando FL 32811	
10/18/2005	L05000102352	
3. Date of filing/registration in Florida	4. Document number	
5.(a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State:	
Registered Agent:	McElwee, IONI	
Registered Office Address:	4545 36TH STREET	
	ORLANDO FL 32811	
(b) Enter name of NEW Registered Agent and/or NEW Re	ogistered Office address:	
NEW Registered Agenu	Corporate Creations Network Inc.	
NEW Registered Office Address:	11380 Prosperity Farms Road #221E	
(MUST BE FLORIDA STREET ADDRESS)		
	Palm Beach Gardens FL 33410	
or changes are made, the Florida street address of the registered	it is bereby confirmed that the change(s) was/were authorized by	
I hereby accept the appointment as registered agent and agree to a all statutes relative to the proper and complete performance only position as registered agent as movided for in Chapter 605,	o act in this capacity. I further agree to comply with the provision.	
in the registered office dildrers. Thereby confirm that the limited	of my duties, and I am familiar with and accept the obligations of F.S. Or, if this document is being filed to merely reflect a change I llability company has been notified in writing of this change.	
in the registered affile allarges. Thereby confirm that the limited (Signature of Registered Agent)	of my duties, and I am familiar with and accept the obligations of F.S. Or, if this document is being filed to merely reflect a change I llability company has been notified in writing of this change. Angela Martin, Special Secretary	
(Signature of Registered Agent) Division of Corporations, P.O. B INRS 18(10/99)	of my duties, and I am familiar with and accept the obligations of F.S. Or, if this document is being filed to merely reflect a change I liability company has been nortified in writing of this change. Angela Martin, Special Secretary ox 6327, Tallahassee, FL 32314	
(Signature of Registered Agent) Division of Corporations, P.O. B	of my duties, and I am familiar with and accept the obligations of F.S. Or, if this document is being filed to merely reflect a change I liability company has been notified in writing of this change. Angela Martin, Special Secretary ox 6327, Tallahassec, FL 32314	
(Signature of Registered Agent) Division of Corporations, P.O. B INRS (\$10/99) Corporate Creations International Inc. 11380 Prosperity Farms Road #221E	of my duties, and I am familiar with and accept the obligations of P.S. Or. if this document is being filed to merely reflect a change I liability company has been notified in writing of this change. Angela Martin, Special Secretary ox 6327, Tallahassec, FL 32314	
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