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(Requestor's Name)						
(Address)						
,						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Certified copies Certificates of Status						
Special Instructions to Filing Officer:						





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TOUR SEP 27 PM 1: 20

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJE	CS Global Networks LLC						
Name of Limited Liability Company							
Dear Si	er or Madam:						
The en	closed Registered Agent/Registered C	office Change and f	ee(s) are submitted for filing.				
Pleasc	return all correspondence concerning	this matter to the f	ollowing:				
Navink	umar Suvarna						
	Name of Person						
CS Glo	bal Networks LLC						
	Firm/Company						
640 Bla	anding Blvd						
	Address						
Orange	Park, FL 32073						
	City/State and Zip Code	•					
	uvarna@ymail.com						
E	E-mail address: (to be used for future a	innual report notifi	cation)				
For fu	rther information concerning this matt	er, please call:					
Navink	cunar Suvarna	904 at (551-8564				
	Name of Person		Area Code & Daytime Telephone Number				
	Mailing Address: Registration Section Division of Corporations		Street Address: Registration Section Division of Corporations				
	P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclosed is a check for the follow	ing amount:					
	□ \$25 Filing Fee	= \$2	55 Filing Fee & Certified Copy				

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. Na	ame of the limited liability company:	orks L	LC		
2. (a)	CS Global Networks LLC		(b) CS Global Networks LLC		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	640 Blnding Blvd		640 Blanding Blvd		
	Orange Park, FL 32073		Orange	Park, FL 32073	
	02/04/2013		L1300001	17636	
3.	Date of filing/registration in Florida	_ 4.		Document number	
5. (a)	Norberto Cruz Jr				
J. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	Norberto Cruz Jr				
	Registered Office Address (MUST BE FLORIDA STREET	ADDR	ESS)		
	12486 Briarmead Ln				
(b)	Jacksonville , FI	3225	8		
	Navinkumar Suvarna			TOPI SEP 27 PH 1: 20 TALLAHASSEE, FL	
	Enter name of NEW Registered Agent and/or NEW Registered	l Offic	e address:	A. 22	
	Navinkumar Suvarna			SEP 27 PH 1:2	
	NEW Registered Office Address:		<u> </u>		
	640 Blanding Blvd				
	Orange Park , FI	3207	3		
change agent v was/we	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liest authorized by an affirmative vote of the members of siles of organization or the operating agreement of the	regis ability of the limit	tered office a company, it limited liability co	and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in company.	
Signa	Signature of a member or authorized representative of a member		Vavinkumar S	Printed or typed name of signee	
I here provisi the obl to men notifie	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I in writing of this change.	ree to perfo d for i hereb	act in this ca rmance of m in Chapter 6 y confirm tha	upacity. I further agree to comply with the	
Signatu	re of Registered Agent				