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(Requestor's Name)	_
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PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	٦
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SECRETARY OF STATE

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COVER LETTER

Division of Corporations
SUBJECT: NAT U.S.A. TNC. /(Name of Corporation)
DOCUMENT NUMBER: 490125
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
NATALE ASTUTO (Name of Contact Person)
NAT U.S.A. TNC. (Firm/Company)
13575-58th St. N. Suite #108 (Address)
CLEARWATER FL 33760 (City/State and Zip Code)
For further information concerning this matter, please call:
NATRIE ASTUTO at (727) 538-7717 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Amendment Section

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	ovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ge is submitted for a corporation organized under the laws of the State of FLORIDA
	to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the	e corporation: NAT U.S.A. INC
2. The principal of	ffice address: 13575 58th St. N. Sum #108
	CLEARWATER FL 33760
3. The mailing add	dress (if different):
4. Date of incorpor	ration/qualification: 1990 Document number: 1-90/25
	treet address of the current registered agent and registered office on file with the
_	NATAUE ASTUTO
	2554 OAKTEAIL, South
	CLEARWATER, FL 3462.4
6. The name and st (if changed):	treet address of the new registered agent (if changed) and /or registered office
	TALL SE 06
	13575 58 4 St. N. Suite #108 ARREAD SECOND S
_	(P.O. Box NOT acceptable) CLEARWATER FL 33760 ED E
	CLEARWATER PC 33/60
	s of its registered office and the street address of the business office of its registered agent, e identical.
Such change was authorized by the	authorized by resolution duly adopted by its board of directors or by an office board, or the corporation has been notified in writing of the change.
Signature	or an office or unearly (Printed or typed name and title)
I hereby accept th I further agree to of my duties, and document is being corporation has b	he appointment as registered agent and agree to act in this capacity. I comply with the provisions of all statutes relative to the proper and complete performance I am familiar with and accept the obligation of my position as registered agent. Or, if this g filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
(Signa	ature of Registered Agent) (Date)
If signing on beha	alf of an entity:
(Тур	ped or Printed Name)
	* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)