## 9900002473

FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302 PHONE: (850) 668-4318 FAX: (850) 668-3398

DATE: 07-18-01

NAME: GALAXY TECHNICAL ASSOCIATES LLC

TYPE OF FILING: ARTICLES OF AMENDMENT

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Change mailing address per Paul

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**AUTHORIZATION:** 

ABBIE/PAUL HODO

## 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 lim	ited liability company i	: s: <u>Galaxy Techni</u>	cal As	sociat	es LLC	
NOPIL		company is : _\332				
Tallahassee,	PL 32302		- DWV	W 31 .	<u> </u>	
April 30, 1999		L990	L9900002473			
3. Date of filing/registration in Florida		4. Docum	4. Document number			
5. The name of the regi Florida Department	stered agent and the reg of State:	ristered office address as	s shown o	n the reco	ords of the	
<u>-</u>	Corporate Cr	eations Enterpr	ises,	Inc.		
	941 Fourth S	Name treet, #200			7. 0	
	Miami BEach,	Address FL 33139			L JUL	
	Cit	y, State and Zip	<del></del>		ASS ASS	
6. The name and address	s of the new registered	agent and/or office:			THE THE	
	Florida Filin	g & Search Serv Name	ices,	Inc.	1:54 STATE FLORIDA	
	1333 North Du	val STreet			A	
	Florida street addre	ess (P.O. Box NOT acce	eptable)			
	Tallahassee	FL 32302				
	City,	State and Zip			-	
If the limited liability of confirmed that after the and the business office liability company, it is I the members of the limit the operating agreement	of the registered agent value of the registered agent value of the limited liability	made, the Florida street will be identical. Or, in the change(s) was/were at a so otherwise provided company.	the case o	f the regis	stered office la limited	
(Signature of a member or auth	ofized refresentative of a mem	ber)		•		
		ed rep. of memb	err			
(Printed of typed name of signs						
I hereby accept the app comply with the provision and I am familiar with a Chapter 608, F.S. Or, is address, I hereby confir	oiniment as registered ons of all statutes relating the obligation of this document is being the this document is being that the limited liabile of the course of the limited liabile of the liabile of the limited liabile of the liabile of	agent and agree to act i ve to the proper and con ns of my position as reg ifiled to merely reflect a lity company has been n	in this cap mplete per gistered ag a change i otified in	acity. I fi formance ent as pr n the regi writing of	urther agree to 3 of my duties, ovided for in istered office f this change.	
(Signature of Registered Agent	)					
Th.22						

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

INHS18(10/99)

**FILING FEE: \$25.00**