

M02000000447

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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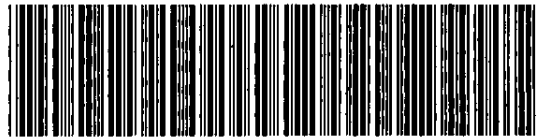
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
09 NOV -3 AM 10:16

B. KOHR

NOV 4 2009

EXAMINER



Registered Agents
Legal Services, LLC

1220 N. Market Street
Suite 806
Wilmington DE 19801
(302) 427-6970
(800) 400-6650
(302) 421-5753 [fax]
info@IncLegal.com [email]
www.IncLegal.com

October 29, 2009

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Source One Network Solutions, LLC

To Whom It May Concern,

Enclosed please find the Statement of Change of Agent for the above referenced entity. Our check in the amount of \$25. to cover the filing fee is enclosed. Please file and return the filed evidence to the following;

Registered Agents Legal Services, LLC
Attn: Terry Scaglione
1220 N. Market Street, Suite 806
Wilmington, DE 19801

Please feel free to contact me with any questions at 1-800-400-6650.
Thanks very much,

Sincerely,

Terry Scaglione
Incorporating Specialist

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Source One Network Solutions, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ms. Terry Scaglione

Name of Person

Registered Agents Legal Services, LLC

Firm/Company

1220 N. Market Street, Suite 806

Address

Wilmington, DE 19801

City/State and Zip Code

terry@inclegal.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Terry Scaglione

Name of Person

at (800)

400-6650

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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DIVISION OF CORPORATIONS
09 NOV - 3 AM 10:16

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. Name of the limited liability company: Source One Network Solutions, LLC

2. (a) Principal office address of limited liability company: 5831 Schumann Drive



(Note: MUST BE STREET ADDRESS)

Fitchburg, WI 53711



(b) Mailing address of limited liability company:

5831 Schumann Drive

(Note: MAY BE POST OFFICE BOX)

2/20/2002

3. Date of filing/registration in Florida

M0200000447

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Corporation Service company

Registered Office Address:

1201 Hays Street
Tallahassee FL 32301-2525

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

Registered Agents Legal Services, LLC

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

155 Office Plaza Drive

Suite A

Tallahassee, FL 32301

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.

Richard A. Bond
Signature of a member or authorized representative of a member

Richard A. Bond.
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 duties, 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 limited liability company has been notified in writing of this change.

Denise Fowler
Signature of Registered Agent

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

FILING FEE: \$25.00