

**CORPORATE  
ACCESS  
INC.**

236 East 6th Avenue • Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 • Fax (850) 222-1666

**WALK IN**

**PICK UP**

3/22/99



☐ **CERTIFIED COPY**

☐ **CUS**

☒ **PHOTO COPY**

☒ **FILING**

Amendment  
R.A. Change

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 MAR 22 AM 11:05

1.) National Comm Link, L.L.C.  
(CORPORATE NAME & DOCUMENT #)

2.) \_\_\_\_\_  
(CORPORATE NAME & DOCUMENT #)

300002812963-0  
-03/22/99-01014-022  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

3.) \_\_\_\_\_  
(CORPORATE NAME & DOCUMENT #)

197-181

4.) \_\_\_\_\_  
(CORPORATE NAME & DOCUMENT #)

Name	RE 377
Availability	
Document	
Signature	
Operator	
Indexer	
Verifier	
Acknowledgment	
W. P. Verifier	

RECEIVED  
99 MAR 22 AM 9:48  
DIVISION OF CORPORATION

5.) \_\_\_\_\_  
(CORPORATE NAME & DOCUMENT #)

**SPECIAL INSTRUCTIONS**

**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 agent, or both, in the State of Florida.*

1. The name of the limited liability company is: National Comm Link, L.L.C.
2. The mailing address of the limited liability company is: 19599 NE 10th Avenue, Suite E,  
N. Miami Beach, FL 33179

April 11, 1997

M97000000181

3. Date of filing/registration in Florida

4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Todd S. Payne, Esq. c/o Zebersky & Payne, L.L.P.

Name

3850 Hollywood Blvd., Ste. 204

Address

Hollywood, FL 33021

City, State and Zip

6. The name and address of the new registered agent and/or office:

NRAI Services, Inc.

Name

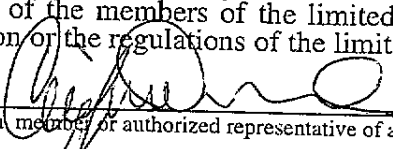
526 E. Park Avenue

Florida street address (P.O. Box NOT acceptable)

Tallahassee FL 32301

City, State and Zip

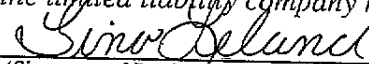
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of a majority of the members of the limited liability company or as otherwise provided in the articles of organization or the regulations of the limited liability company.

  
(Signature of a member or authorized representative of a member)

Clifford Duke, Member

(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. 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.*

  
(Signature of Registered Agent) Tina Leland, Assistant Secretary

for National Registered Agents, Inc.  
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 MAR 22 AM 11:05