N9800000 6703

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
<u>_</u>
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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TALLAHASSEE EL GONTA

S. YOUNG

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: NET Training Institute, Inc	
Name of Corporation	
DOCUMENT NUMBER: N9800006703	

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:

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

For further information concerning this matter, please call:

Jean M LaCour at (407) 446-3740

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

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

statement of ch	ange is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida , organized under the laws of the State of <u>]</u> registered agent, or both, in the State of I	Florida	
1. The name of	the corporation: NET Training	Institute, Inc		
2. The principa	l office address: 4767 New Bro	oad St. Orlando, FL 32814		
3. The mailing	address (if different): P O Box 2	2508 Daytona Beach, FL 3	2115	
4. Date of inco	rporation/qualification: 11/23/19	98 Document number: N9800	00006703	
	nd street address of the current registed artment of State: (If resigned, enter re	ered agent and registered office on file wesigned)	ith the	
	Jean M LaCour			
	136 Brown Pelican Dr		19 14 15	
	Daytona Beach, FL 321	19	JUL 22 AHASSE	η
6. The name an (if changed):	d street address of the new registered	d agent (if changed) and /or registered of	ficeri 및 및 및 및 및 및 및 및 및 및 및 및 및 및 및 및 및 및 및	ロニカフ
	Jean M LaCour		6: 19	
	4767 New Broad St		ک حر	
	Orlando, FL 32814	x NOT acceptable		
The street addr as changed wil	ress of its registered office and the s I be identical.	treet address of the business office of it	s registered agent	
Such change wauthorized by t	ras authorized by resolution duly add the board, or the corporation has bee	opted by its board of directors or by an en notified in writing of the change.	officer so	
- Jean	ure of an officer of director	Jean M LaCour	E Sec.	
I fjyfthér agrée nerformance o	f my dúties, and I am familiar with c	nt and agree to act in this capacity. I statutes relative to the proper and com and accept the obligation of my position o reflect a change in the registered offic fied in writing of this change.	i as registered 🧪	
Slan	K. La Can	July 17, 2019		
	gflature of Registered Agent chalf of an entity:	Date		
Jean M La	·			
	Typed or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

* * * FILING FEE: \$35.00 * * *