

FROM: H

FAX NO: 407 244 5288

11-08-05 11:17A P.01

P00000044000

Florida Department of State
Division of Corporations
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DIVISION OF CORPORATIONS

REGISTERED AGENT CHANGE

NEWGATE TECHNOLOGIES, INC.

Certificate of Status	0
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Page Count	01
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PS 11/8/05

FROM: H

FAX NO.: 4072445288

11-08-05 11:17A P.02



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

November 4, 2005

NEWGATE TECHNOLOGIES, INC.
1137 SW 7TH RD
OCALA, FL 34474

SUBJECT: NEWGATE TECHNOLOGIES, INC.
REF: P00000044000

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current registered agent name must reflect our records. We show CORNELIS F STAKENBORG, please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Document Specialist

FAX Aud. #: H05000254697
Letter Number: 105A00066285

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: NEWGATE TECHNOLOGIES, INC.
2. The principal office address: 1137 SW 7TH RD
OCALA FL 34474
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 05/01/2000 Document number: P00000044000
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: F.
CORNELIS STAKENBORG
10705 NE 151ST STREET
SUMMERFIELD FL 34491
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
SUNDARA R MYLAVARAPU
1137 SW 7TH RD
(P.O. Box NOT acceptable)
OCALA FL 34474

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DIVISION OF STATE

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

S. R. Mylavarapu
(Signature of an officer or director)

SUNDARA R MYLAVARAPU, President
(Printed or typed name and title)

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

S. R. Mylavarapu
(Signature of Registered Agent)

11/1/05
(Date)

If signing on behalf of an entity:

(Typed 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