P00000049089

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(Address)						
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(City/State/Zip/Phone #)	_					
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: 101 Jech Resources Inc. (Name of corporation)
DOCUMENT NUMBER: <u>P0000049089</u>
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:
Angelina Brown-e (Name of person)
Advantech Solutions, Inc. (Name of firm/company)
1410 N. Westshore Blvd., Suite 1000
Tampa, FL 33607-4532 (City/state and zip code)
For further information concerning this matter, please call:
Angelina Browne at (813) 207-8582 (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:Street Address:Amendment Section— Amendment SectionDivision of Corporations— Division of CorporationsP.O. Box 6327— 409 E. Gaines StreetTallahassee, FL 32314— Tallahassee, FL 32399

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

_			12, 607.1508, or 617.1508,		-
-	-	_	he laws of the State of h, in the State of Florida.	rlonda	in order
1. The name of the	he corporation:T	altech P	resources In		
2. The principal	office address: 14		Destshore Blue	· ·	
3 The mailing ac	ddress (if different):	mpa, FL	<u> 331.07 - 45</u> -	77 ~	
	adioss (it differenty	<u> </u>		.	
4. Date of incorp	oration/qualification:	5/17/00	Document number:	Pagagay	9089
5. The name and Florida Depart		urrent registered a	gent and registered office	on file with the	
	Slev	en Talle	<u> </u>	<u></u>	
	1405	Fox Cha	pel Dr		
	_ Lutz	FL 3	3549		
6. The name and (if changed):	street address of the n	ew registered ager	nt (if changed) and /or regi	stered office	03 NOV
	David	D. Vol	ρ <u>i</u>	ASS	
	1410 N.	Westsho (P.O. Box or personal i	re Blud Sud mailbox NOT acceptable)	k 600 F	
	lampa,	FC 3	33607-4532		. 08
The street addres	ss of its registered off identical.	ice and the street	address of the business o	ffice of its registered a	gent, as
Such change was	s authorized by resolution has been	ution duly adopted notified in writing	d by its board of directors ig of the change.	s or by an officer so au	thorized by
	gnature of an officer or direc		David	ted or typed name and title)	
I hereby accept i I further agree to duties, and I am being filed merei been notified in v	the appointment as re o comply with the pro familiar with and acc ly to refleat a change writing of this change	gistered agent an wisions of all state cept the obligation in the registered c.	d agree to act in this cap utes relative to the prope n of my position as regist office address, I hereby c	acity. r and complete perforn ered agent. Or, if this onfirm that the corpor	nance of my document is ation has
	=1/1/		<u> </u>	1D3	
/ (Signature of Registered Agen	rt)		(Date)	
If signing on beh	nalf of an entity;	/	-		
	(Typed or Printed Nazze)		_ Presid	(Capacity)	

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