P00000107977

(Requ	iestor's Name)	
(Addr	ess)	
(Addr		
(Addi	533)	
(City/s	State/Zip/Phone	e #)
		_
PICK-UP	WAIT	MAIL
(Rusii	ness Entity Nam	20)
(Dusii	1622 Emily Mail	16)
(Docı	ıment Number)	
Certified Copies	Certificates	of Status
·		
Special Instructions to Fi	ling Officer:	
		į

Office Use Only



700112881267



07 DEC 12 PM 3: 21
SECRETARY OF STATE
ALLAHASSEE, FLORID

APPROVED AND FILFO

RA. Charge



ON PERAICE COMPANY.		
ACCOUNT NO. : 072100000032		
REFERENCE : 357349 7506572		
AUTHORIZATION Spelle Man		
COST LIMIT : \$ 35.00		
ORDER DATE: December 12, 2007		
ORDER TIME : 12:37 PM		
ORDER NO. : 357349-010		
CUSTOMER NO: 7506572		
·		
CHANGE OF AGENT		
NAME CONNEYER ONG THE		
NAME: CONNEXTIONS, INC.		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
XX PLAIN STAMPED COPY		
CONTACT DEDCON. Cinds Hammin EVEL 2027		
CONTACT PERSON: Cindy Harris EXT# 2937		
H'X DM I N H'D		

.

.

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

Pursuant to the provisions of sections 607.0502, 617.05 statement of change is submitted for a corporation organization in order to change its registered office or regis	inized under the laws of the State of $\overline{ ext{FLO}}$	RIDA	
1. The name of the corporation: CONNEXTIONS	S, INC.		
2. The principal office address: 3600 E Commerc	ee Place		
11/02/0200	70000010		
4. Date of incorporation/qualification: 11/20/2000	Document number: P00000107	1977	
5. The name and street address of the current registered Florida Department of State:	agent and registered office on file with the		
Byrd F Marshall JR. Gray &	Robinson, P.A.		
301 East Pine Street Suite 14	00	· — —	
Orlando, FL 32801		07 DEC SECRET TALLAH	
6. The name and street address of the new registered ag (if changed):	ent (if changed) and /or registered office	DEC 12 PH CRETARY OF LLAHASSEE.	FILEC
Corporation Service Compar	ny	$\frac{\pi}{2}$	
1201 Hays Street		3: 21 TATE ORID	
(P.O. Box NOT acceptab	ile)	72	
Tallahassee, FL 32301			
The street address of its registered office and the street as changed will be identical.	et address of the business office of its regi	istered agent,	
Such change was authorized by resolution duly adopt authorized by the board, or the corporation has been	ted by its board of directors or by an offic notified in writing of the change.	er so	
	Williamsphas Corposefel	Euclan	
(Signature of an officer or director)	(Printed of typed name and title)		
Thereby accept the appointment as registered agent of further agree to comply with the provisions of all story of my duties, and I am familiar with and accept the odocument is being filed merely to reflect a change in corporation has been notified in writing of this change	and agree to act in this capacity. atutes relative to the proper and complete bligation of my position as registered age the registered office address, I hereby con ge.	performance int. Or, if this infirm that the	
By: Lynthax Halro	12/12/07		
(Signature of Registered Agent)	(Date)		
If signing on behalf of an entity: Cynthia L. Harris Acet Vice President (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
45 (8/05)

CR2E045 (8/05)