

PO1000095869

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

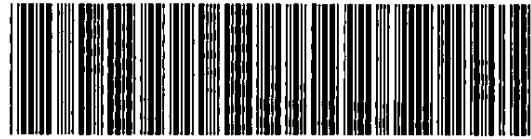
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SHEPHERD, McCABE AND COOLEY
ATTORNEYS AND COUNSELORS AT LAW

JAMES E. SHEPHERD
WILLIAM J. McCABE
R. EDWARD COOLEY

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SUITE 200
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FAX (407) 830-9049

E-MAIL jeshepherdsec@earthlink.net

September 16, 2010

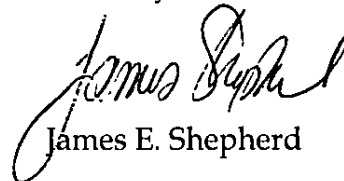
Amendment Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Dear Sir/Madam:

Enclosed please find an original Statement of Change of Registered Agent for CNSP Enterprises, Inc., as well as a check for \$35.00.

Please update the corporate records accordingly.

Sincerely Yours,



James E. Shepherd

JES/lja
Encls.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CNSP ENTERPRISE, INC.
Name of Corporation

DOCUMENT NUMBER: P01000095869

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:

JAMES E. SHEPHERD, ESQ
Name of Contact Person

SHEPHERD MCCABE & COOLEY
Firm/Company

1450 W. SR 434, SUITE 200
Address

LONGWOOD, FL 32750
City/State and Zip Code

JESHEPHERDSEC@EARTHLINK.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JAMES E. SHEPHERD at (407) 830-9191
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**

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: CNSP ENTERPRISE INC.
2. The principal office address: 2469 W US HWY 90, SUITE NO 124, LAKE CITY FL 32055
3. The mailing address (if different): 2282 S. Kirkman Road Orlando, FL 32811
4. Date of incorporation/qualification: October 2, 2001 Document number: P01000095869
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

SHERRY GULLEY

2469 W US HWY 90 STE NO. 124

LAKE CITY FL 32055 US

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

ASHOK HARJANI

2282 S. Kirkman Road

P.O. Box NOT acceptable

Orlando, FL 32811

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.

Anita Harjani
Signature of an officer or director

Anita HARJANI VICE 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.

[Signature]
Signature of Registered Agent

8/25/10
Date

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E:045 (8/05)