P0200038291

| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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COVER LETTER

| TO: | Amendment Section Division of Corporations | |
|--------|---|---|
| SUBJ | ECT: SUNSTAR TELEKOM, I | NC. Corporation) |
| DOC | UMENT NUMBER: P02000038291 | |
| The er | nclosed Statement of Change of Registered Offic | e/Agent and fee are submitted for filing. |
| Please | return all correspondence concerning this matte | r to the following: |
| | | |
| | TUNG B PHAM | ntact Person) |
| | (Name of Co | mact reison) |
| | SUNSTAR TELEKOM | . INC. |
| | (Firm/Co | ompany) |
| | | |
| | 2177 WESTBOURNE | DR. ress) |
| | (| |
| | OVIEDO, FL 32765 | |
| | (City/State ar | nd Zip Code) |
| For fu | rther information concerning this matter, please of | call: |
| | TUNG B PHAM | at (321) 303-7394 |
| | (Name of Contact Person) | at (321) 303-7394 (Area Code & Daytime Telephone Number) |
| Enclos | sed is a \$35.00 check made payable to the Depart | tment of State. |
| | Mailing Address: Amendment Section | Street Address: |
| | Amendment Section Division of Corporations | Amendment Section Division of Corporations |
| | P.O. Box 6327 | Clifton Building |
| | Tallahassee, FL 32314 | 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, the | is | | | |
|--|-----------------------------------|---|--|--|
| 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. | | | | |
| The name of the corporation: SUNSTAR TELEKOM, INC. | | | | |
| 2. The principal office address: 11618 E. COLONIAL DR., ORLANDO, FL 32817 | | | | |
| | | | | |
| 3. The mailing address (if different): | | | | |
| 4. Date of incorporation/qualification: APRIL 09, 2002 Document number: P0200003829 | 31 | | | |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: | | | | |
| TUNG B PHAM | 05 | | | |
| 11618 E. COLONIAL DR. | | | | |
| ORLANDO, FL 32817 | OCT 24 | | | |
| 6. The name and street address of the new registered agent (if changed) and /or registered office | | | | |
| TUNG B PHAM | 2: 40 | == ;.; ================================= | | |
| 2177 WESTBOURNE DR. (P.O. Box NOT acceptable) | | | | |
| OVIEDO, FL 32765 | | | | |
| The street address of its registered office and the street address of the business office of its registere as changed will be identical. | d agent, | | | |
| 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. | | | | |
| TUNG PHAM, PRESIDENT (Printed or typed name and title) | <u> </u> | | | |
| 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 performs duties, and I am familiar with and accept the obligation of my position as registered agent. Of document is being filed merely to reflect a change in the registered office address, I hereby confirm corporation has been notified in writing of this change. | ormance or if this that the | ? | | |
| (Signal of Refistered Agent) 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 CR2E045 (8/05)