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(Re	equestor's Name)						
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COVER LETTER

TO: Amendment Section Division of Corporations						
SUBJECT: VOICEXPRESS, INC (Name of Corpora	tion)					
DOCUMENT NUMBER: P02000124885						
The enclosed Statement of Change of Registered Office/Agen	at and fee are submitted for filing.					
Please return all correspondence concerning this matter to the						
, , , , , , , , , , , , , , , , , , , ,						
Karen Redman						
(Name of Contact Person)						
NDAL Camilana Inc						
NRAI Services, Inc. (Firm/Company	<u>/</u>					
(Time company						
2731 Executive Park Drive Suite 4						
(Address)						
Weston, FI 33331						
(City/State and Zip Code)						
For further information concerning this matter, please call:						
Karen Redman at ((Area Code & Daytime Telephone Number)					
(Name of Contact Person)	(Area Code & Daytime Telephone Number)					
Enclosed is a \$35.00 check made payable to the Department of	of State.					
Mailing Address:	Street Address:					
Amendment Section	Amendment Section					
Division of Corporations P.O. Box 6327	Division of Corporations 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

statement of cha	nge is submitted for a corp	oration organizea	07.1508, or 617.1508, Floi I under the laws of the Stat I agent, or both, in the State	e of FLORIDA		_
1. The name of the corporation: VOICEXPRESS, INC			•			
			TH RD SUITE 510 #13			
	ATER, FLORIDA 337					
3. The mailing a	ddress (if different): SAN	ME AS ABOVE				
4. Date of incorp	poration/qualification: 11/2	22/2002	_ Document number: P0	2000124	1885	
5. The name and			t and registered office on fi			
	CHARLES R DA	RST				
	734 WEEDON DE	RIVE NE				
	ST PETERSBUR	G, FL 33702				
6. The name and (if changed):	street address of the new r	registered agent (it	f changed) and /or registere	ed office	06	
	NRAI Services, In	ıc.		<u>}</u>	8	71
2731 Executive Park Drive, Suite 4					; ~	
	Weston, FL 333	NOT acceptable)		E, FLO	PHIC	ED
The street addre	ess of its registered office be identical.	and the street add	lress of the business office	of its resident	redinge	nt,
Such change wa authorized by th	as authorized by resolution the board, or the corporation	n duly adopted by on has been notific	its board of directors or led in writing of the chang	by an officer e.	so	
(Signati	ire of an officer or director)	<u>E</u>	BRYAN GLAUS, CFO			_
I hanabu accomt	the armointment on variet	ered agent and a ons of all statutes accept the obligat a change in the re of this change.	gree to act in this capacity relative to the proper an tion of my position as regi egistered office address, I	,	erforma Or, if i rm thát i	nce this the
(SI)	enature of Registered Agent)		10/6/06 (Date)			_
If signing on be	half of an entity:					

Karen Redman, NRAI Services, Inc.

(Typed or Printed Name)

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