## P03000078067

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: Net5 Solution Enterprises, Inc.

Name of Corporation

DOCUMENT NUMBER: P03000078067

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:

Harding, William A.

Name of Contact Person

Net5 Solution Enterprises, Inc.

Firm/Company

3410 S Tropical Trl

Addres

Merritt Island, FL 32952

City/State and Zip Code

billh@campro.us

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William A. Harding

,,321 \6046648

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida rockange its registered office or registered agent, or both, in the State of Florida.
	he corporation: Net5 Solution Enterprises, Inc.
1. The name of t	office address: 3410 S Tropical Trl, Merritt Island, FL 32952
2. The principal	office address:
3. The mailing a	ddress (if different): PO Box 541765, Merritt Island, FL 32954-1765
4. Date of incorp	poration/qualification: 07/16/2003 Document number: P03000078067
	I street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	(agent) Harding, William A.
	225 Sykes Point Lane
	Merritt Island, FL 32953
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered whice (agent) Harding, William A.
	3410 S Tropical Trl
	P.O. Box NOT acceptable
	Merritt Island, FL 32952
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.
Signatur	William A. Harding, President Printed or typed name and title
I hereby accept I further agree t performance of agent. Or, if thi	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
a	01/02/2013
_	nature of Registered Agent Date
If signing on bel	half of an entity:
T.	and or Printed Name

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