P03000079831

| (Re | equestor's Name) | | | |
|---|--------------------|-----------------|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (Cit | ry/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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FALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

| TO: | Amendment Section Division of Corporations | |
|--------|--|--|
| SUBJ | JECT: High Tech Computer Services INC. | |
| | (Name of corporation) | |
| DOC | CUMENT NUMBER: P03000079831 | |
| The e | enclosed Statement of Change of Registered Office/Agent and fee are submitted | for filing. |
| Please | se return all correspondence concerning this matter to the following: | |
| | David C. Warren | |
| | (Name of person) | |
| | | ALL A |
| | High Tech Computer Services INC. | |
| | (Name of firm/company) | ASS 30 |
| 2 | 27446 Kirkwood Circle | PILED O4 JAN 30 PH 12: TALLAI ASSEE, FLO |
| | (Address) | <u> </u> |
| | | DA D |
| | Wesley Chapel, Fl. 33543 | |
| | (City/state and zip code) | |
| For fu | further information concerning this matter, please call: | |
| Davi | vid C. Warrenat(813) | 929-4277 |
| | (Name of person) (Area code & | daytime telephone number) |
| Enclo | osed 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 Add Amendmen Division of P.O. Box 6327 Tallahassee | tress: tt Section Corporations tes Street The FL 32399 |

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

| | provisions of sections 607.0502, 617.0502, 6 tted for a corporation organized under the la | 607.1508, or 617.1508, Florida Statutes, this statement of two sof the State of Florida in orde |
|--|---|---|
| to change its reg | istered office or registered agent, or both, it | the State of Florida. |
| 1. The name of t | he corporation: High Tech Computer Serv | ices INC. |
| 2. The principal | office address: 27446 Kirkwood Circle | Wesley Chapel, FL. 33543 |
| 3. The mailing a | ddress (if different): | |
| 4. Date of incorp | poration/qualification: July 17, 2004 | |
| | street address of the current registered agen tment of State: | t and registered office on file with the |
| | David C. Warren | |
| | 18002 Richmond Place Dr. suite 3127 | =: 0 |
| | Tampa, FL. 33647 | ELS: LE |
| 6. The name and (if changed): | street address of the new registered agent (i | f changed) and /or registered office |
| | David C. Warren | FLOR 2: 1 |
| | 27446 Kirkwood Circle | IDA O |
| | (P.O. Box or personal mails | ox NOT acceptable) |
| | Wesley Chapel, FL. 33543 | |
| The street addre changed will be | ss of its registered office and the street add identical. | ress of the business office of its registered agent, as |
| Such change wa | s authorized by resolution duly adopted by corporation has been notified in writing o | its board of directors or by an officer so authorized by f the change. |
| Durch | 2 Woren | .David C. Warren |
| - (S | gnature of an officer or director) | (Printed or typed name and title) |
| duties, and I am being filed mere | the appointment as registered agent and a comply with the provisions of all statutes familiar with and accept the obligation of ly to reflect a change in the registered officeriting of this change. | gree to act in this capacity. relative to the proper and complete performance of my my position as registered agent. Or, if this document is ce address, I hereby confirm that the corporation has |
| 1100 | | Jan. 26, 2004 |
| The state of the s | Signature of Registered Agent) | (Date) |
| If signing on bel | half of an entity: | |
| David C. Warre | | Owner |
| | (Typed or Printed Name) | (Capacity) |

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