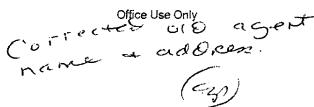
P04000028242

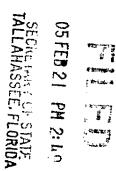
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.





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01/21/05--01015--012 **35.00



RAIRO CAS. Sp 2/21/05

COVER LETTER '

TO:	Amendment Section
	Division of Corporations

SUBJECT: nexterel Communications (Name of corporation)			
DOCUMENT NUMBER: Tay ID # 84-163-7237			
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:			
Chris Coney (Name of contact person)			
nexlevel Communications (Firm/Company)			
8427 Port Said St. (Address)			
Orlando FL 32817 (City/state and zip code)			
For further information concerning this matter, please call:			
Chris Coucy at (407) 312-7868 (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 409 E. Gaines Street Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 26, 2005

CHRIS COUEY 8427 PORT SAID ST. ORLANDO, FL 32817

SUBJECT: NEXLEVEL COMMUNICATIONS CORP.

Ref. Number: P04000028242

We have received your document for NEXLEVEL COMMUNICATIONS CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6909.

Velma Shepard Document Specialist

Letter Number: 905A00005416

05 FEB 21 AM 8: 15

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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: nextend Communications Corp.
2. The principal office address: 8427 Port Said St
Orlande FL 32817
3. The mailing address (if different):
4. Date of incorporation/qualification: Feb 04 Document number: don't know
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
& Corporation Service Company
1201 Hays Street
Tallahasser, FC 323cl
6. The name and street address of the new registered agent (if changed) and /or registered of registered of the control of the changed):
Chris Coursey S427 Port Said St (P.O. Box NOT acceptable)
Onlando FL 32817
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.
(Signature of an officer or director) (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 of Registered Agent)
If signing on behalf of an entity:
(Typed or Printed Name)

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