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Sandy Payne CPA

COVER LETTER
TO: An enginent Section Division of Corpe, ations
SUBJECT: Global Commerce and Network Technology, Inc. (Name of corporation)
DOCUMENT NUMBER: <u>POS 000019 250</u>
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:
Mark Schneider (Name of contact person) Global Commence and Net of Technology to
25032 Acord Drive
Lund Chokes FL 34639 (City/state and zip code)
For further information concerning this matter, please call:
Mank Sciencion at (83) 785 9633 Name of contact person) (Area code & day time 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

C'R2E045(6/04)

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

~E /

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida Statutes, this or itement of charge is submitted for a corporation organized under the time of the State of 100 ida.
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: 6/06a Commerce and Notwork Technology, Inc.
2 The principal office address: 25032 Acorn Drive, Land O'Lakes, TL
34639
3. The mailing address (if different):
4 Date of incorporation/qualification 2/7/05 Document number. \$\int Pos.000019.250
 The name and street address of the current registered agent and registered office on file with the Florida Department of State;
William R. Schoefer
8402 0 No AL, HWY STR 1075 5
Tampa, FL 33614 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): MANE Schnopen 250 32 Acong Pa
6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed): MANE SCHNEIDER
1 /AME OCHNOPOL
25032 Acorn Pr (P.O. Box NOT acceptable)
(P.O. Box NO1 acceptable)
Land or LANG FL 34635
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.
Man Schner
l 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.
Mad Il Sprance of Registered Ageing 2/17/05 (Date)
If signing on behalf of an entity:
Mrs C.
(Types or Printed Name)

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