PD8000002119

Office Use Only



400182988994

07/12/10--01024--009 **35.00

Rolch8 (10)/13/10

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	ECT: Mainpoint Communications, Inc Name of Corporation
DOC	UMENT NUMBER: P08000002119
The er	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	John S Biays Jr Name of Contact Person
	Mainpoint Communications Inc Firm/Company
	4807 SW 91st Drive Address
	Gainesville, FL 32608 City/State and Zip Code
	joshbi@aol.com E-mail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
	John Biaysat (352)377-3773Name of Contact PersonArea Code & Daytime Telephone Number
Enclos	ed is a \$35.00 check made payable to the Department of State.
	Mailing Address: Amendment Section Division of Corporations Street Address: Amendment Section Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

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 ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: Mainpoint Communications NC.	
2. The principal	office address: 4807 SW 91st Drive	
Gainesville	e, FL 32608	
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 01/07/2008 Document number: P08000002119	_
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	John S Biays Jr.	
	9502 SW 50th Road	
	Gainesville, FL 32608	
6. The name and (if changed):	John S Biays Jr 4807 SW 91st Drive	トラファイー
	John S Biays Jr	77
	4807 SW 91st Drive	
	P.O. Box NOT acceptable	9
	P.O. Box NOT acceptable N. Gainesville, FL 32608	
The street addre as changed will	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	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change.	
Signatur	John S. Biays Jr. Printed or typed name and title	
I hereby accept I further agree to of my duties, and document is bein corporation has	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.	
10	A Branch nature of Registered Agent Autor Date	
\mathcal{O}	half of an entity:	
Ту	yped or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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