P08000046169

NO Return Address (Requestor's Name)
(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:

Office Use Only



100130717401

06/09/08--01012--005 **35.00

FILED

2008 JUN -9 PM 3: 18

SECRETARY OF STATE

 \Box Δ Δ Δ

R.A. Change 6/11/08

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

statement of char	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida rto change its registered office or registered agent, or both, in the State of Florida.
	he corporation: Coastal Communication Providers, Inc.
2. The principal	office address: 7156 Colony Club Drive, Suite 104
<u>-</u> -	Lake Worth, FL 33463
3. The mailing a	ddress (if different):same
·	
4. Date of incorp	poration/qualification: May 7, 2008 Document number: P08000046169
5. The name and Florida Depart	street address of the current registered agent and registered office on file with the tment of State:
	UCC Filing & Search Services, Inc.
	1574 Village Square, Suite 100
	Tallahassee, Florida 32309
6. The name and (if changed):	Tallahassee, Florida 32309 Street address of the new registered agent (if changed) and /or registered office Tallahassee of the new registered agent (if changed) and /or registered office Tallahassee of the new registered agent (if changed) and /or registered office
	James N. Bradford, Jr.
	14160 Palmetto Frontage RD Suite 32
	(P.O. Box NOT acceptable)
	Miami Lakes, Florida 33016
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
/ //	the authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.
	Jeffrey Clark Pres (Printed or typed name and title)
I further agree t	the appointment as registered agent and agree to act in this capacity. The complete performance to comply with the provisions of all statutes relative to the proper and complete performance d 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.
ames	1 Brafford dela
,	mature of Registered Agent) (Date)
it signing on bel	half of an entity:
	Bradford, Jr. Typed or Printed Name)
jej dre in Translation	* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)