

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

: CORPORATION SERVICE COMPANY Account Name

Account Number : I2000000195 Phone (850) 521-1000

Fax Number : (850)558-1575

REGISTERED AGENT CHANGE

TERACTIVE COMMUNICATIONS INTERNATIONAL, INC.

Certificate of Status Certified Copy 0 Page Count 02 Estimated Charge \$35.00

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

statement of chang	ovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ge is submitted for a corporation organized under the laws of the State of Florida	
•	to change its registered office or registered agent, or both, in the State of Florida.	
	corporation: INTERACTIVE COMMUNICATIONS INTERNATIONAL, INC.	
2. The principal of	ffice address: 250 Williams Street Suite M-100, Atlanta, GA 30303	_
3. The mailing add	dress (if different):	
4. Date of incorpor	ration/qualification: 05/27/2009 Document number: P09000046480	
S. The name and st Florida Departm	treet address of the current registered agent and registered office on file with the nent of State:	
C	T Corporation System P	
1	200 South Pine Island Road	Ţ
_ <u>H</u>	Plantation, FL 33324	; ;
Florida Department of State: C T Corporation System 1200 South Pine Island Road Plantation, FL 33324 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
<u>C</u>	Corporation Service Company	
1	1201 Hays Street	
_	(P.O. Box NOT acceptable)	
<u>r</u>	Tallahassee, FL 32301	
The street address as changed will be	s of its registered office and the street address of the business office of its registered agent, e identical.	
Such change was authorized by the	authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.	
(Signature	Maureen Cullen, Attorney In Fact (Printed or typed name and title)	
I hereby accept th I further agree to of my duties, and document is being corporation has b	te appointment as registered agent and agree to act in this capacity, comply with the provisions of all statutes relative to the proper and complete performance I am familiar with and accept the obligation of my position as registered agent. Or, if this is filed merely to reflect a change in the registered office address, I hereby confirm that the een notified in writing of this change.	
	on Service Company 09/04/2009	
(Signat	19/04/2009 (Date)	
If signing on beha	alf of an entity:	
Sylvia Queppo		
(Тур	oed or Printed Name)	
	* * * 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)