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COVER LETTER

TO: Amendment Section Division of Corpora				
SUBJECT:	CNC Commun	nications Corporation	s, Inc.	
DOCUMENT NUMBER:	1	•	_	
The enclosed Statement of (Change of Registered Off	ice/Agent	and fee are subm	nitted for filing.
Please return all correspond	ence concerning this mat	ter to the fo	ollowing:	
	Ch via	- Dial44		
	Name of C	S Pickett Contact Per	son	
	CNC Comm		is, Inc.	
	Firm/0	Company		
	170 Δ	.1A North		
		dress		
	Ponte Vedra Bea			
	City/State	and Zip Co	ode	
	ср@досі	ncinc.cor	n	
E-mail	address: (to be used for	future an	nual report not	ification)
For further information cond	erning this matter places	e call·		
Chris Name of Cor	Pickett	at (904)	404-6004 time Telephone Number
Name of Col	nact i cison	A	ica Code & Day	ume reiephone Number
Enclosed is a \$35.00 check i	nade payable to the Depa	artment of	State.	
Ma	iling Address:		Street Address	s:
Am	endment Section		Amendment S	Section
	rision of Corporations		Division of C	
	P. Box 6327 - lahassee, FL 32314		Clifton Build	ing ve Center Circle
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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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: CNC Communications, Inc.
2. The principal office address: 170 A1A North, Ponte Vedra Beach, Florida 32082
3. The mailing address (if different):
4. Date of incorporation/qualification: 5/20/2011 Document number: PI 000 484 (
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Chris Pickett
230 A1A North EE 日 可
Ponte Vedra Beach, Florida 32082
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Chris Pickett
170 A1A North
P.O. Box NOT acceptable
Ponte Vedra Beach, Florida 32082
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.
Christine Micieli-Pickett, President 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 Date
If signing on behalf of an entity:
Christine Micieli-Pickett Typed 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 * * *