Pl2 50 Requestor's Name

900002637969---09/14/98--01029--007 ****280.00 *****35.0

Office Use Only

UMBER(S), (if known):

CHARLES COYLE & COMPANY, INC. 826 Shadybrook Drive Suite B

Marietta, GA 30066-6216 Phone: (800) 211-8645 Fax (800) 211-8647

`_1.					
<u></u>	(Corporation	Name)		(Docume	ent#)
2	(Corporation	Name)		(Docume	ent #)
3	(Corporation Name)		(Document #)		
4	(Corporation	Name)	 	(Docum	ent #)
☐ Walk in ☐ Mail out	□ Pie	-	Photoco	ру	Certified Copy Certificate of Starts Sc
NEW FILINGS		AMEN	DMENTS		SSA = 1
Profit		Amendme	ent		PH 2
NonProfit		Resignation of R.A., Officer/ Director			
Limited Liability		Change of Registered Agent			
Domestication		Dissolution/Withdrawal			
0.1		Margar			

OTHER BIMNES
Annual Report
Fictitious Name
 Name Reservation

REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
Trademark
Other

RACH9 ORG/16

Examiner's Initials	

Florida Department of State, Jim Smith, Secretary of State

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

Pursuant to the provisions of sections 607.050 Florida Statutes, the undersigned corporation of tennessee submits the following statements.	· · · · · · · · · · · · · · · · · · ·
or registered agent, or both, in the State Florid	
1a. The name of the corporation is: Cylix Communications	s Corporation
1b. Date of incorporation: 1-2-87	Document number P12750
2. The name and address of the current regis	tered agent and office:
1200 South Pine Island Road, Plantation,	-Fil G
3. The name and address of the new registere (P.O. Box Not Acceptable)	d agent and office:
NRAI Services, Inc.	SEX B III
526 East Park Avenue, Tallahassee, Florida 32301	77 22
The street address of its registered agent and to of its registered agent as changed will be identified to be a second agent and the street agent agent and the street agent agent and the street agent agen	ical.
Such change was authorized by resolution duly an officer so authorized by the board.	adopted by its board of directors or by
Willin Ednilo	William E. Anderson - Assistant Secretary
SIGNATURE	Typed or printed name and title
8-10-98 DATE	
SIGNAT Charles A	ATION AT THE PLACE DESIGNATED E APPOINTMENT AS REGISTERED TY. I FURTHER AGREE TO COMPLY ELATIVE TO THE PROPER AND COM-AM FAMILIAR WITH AND ACCEPT STERED AGENT. EVER By: Clark Coyle (Registered Agent) ASST. Secy.
DATE	8-14-98

CR2E045 (7-91)

FILING FEE: \$35.00