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	NonProfit	Resignation of R.A	A., Officer/Director			
	Limited Liability	Change of Register	red Agent			
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CDSEVS	1/1/05\			Examiner's Initials		

CR2E031(1/95)

Florida Department of State, Sandra B. Mortham, Secretary of State

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, the undersigned corporation organized under the law of the State of Florida submits the following statement in order in change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is:	Interco	om Network, Inc.				
1b The mailing address of the corpora	tion is:	1150 NW 72 Avenue, Suite 455; Miami, FL 33126				
1c. Date of Incorporation: August 4	, 1994	Document number:	P94000057696			
2. The name and address of the curr	ent regi	istered agent and office:	-			
	Jorge	Poincot				
13240 S.W. 88 th Lane						
i	Miami. I	FL 33186	-1. 9			
3. The name and address of the new i	register	ed agent and office: [P.O	== 1			
	Roger	A. Slade	SS CO			
Phillips, Eisinger, Pat	hman, ł	Koss, Lewis & Rosenfeldt	;, P.A.			
وي One Biscayne Tower, Suite 3660						
2 Sou	2 South Biscayne Boulevard					
ı	Miami, I	FL 33131				
Such change was authorized by resolu authorized by the board (Signature of an officer, chairm Vice chairman of the board)		ly adopted by its board o	f directors or by an officer so 7/23/199 (Date)			
(Printed or typed name and title		T CEO				
Having been named as registered ag corporation, I hereby accept the appoint further agree to comply with the propertion of my duties, and I am faagent.	ntment a	as registered agent and a of all statutes relative	gree to act in this capacity. I to the proper and complete			
[Signature of Registered Agen	 †1		[Date]			
tolanara de magtara Agan	-3		[240]			
If signing on behalf of an entity:						
Roger A. Slade			Registered Agent			
[Typed or Printed Name]		. -	[Capacity]			