

P950000 73253

(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



300323832313

01/28/19--01025--030 **35.00

2019 JAN 28 PM 2:18

FILED

FILED
TELETYPE

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **Network 2001 Inc**
Name of Corporation

DOCUMENT NUMBER: **P95000073253**

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Larry Finkle
Name of Contact Person

Network 2001, Inc.
Firm/Company

4645 Gilronan Ct.
Address

Palm Harbor, FL 34685
City/State and Zip Code

lfinkle@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Larry Finkle at (**727**) **424-1930**
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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: Network 2001, Inc.
2. The principal office address: 4645 Gilronan Ct.
Palm Harbor, FL 34685
3. The mailing address (if different): same
4. Date of incorporation/qualification: 9/20/1995 Document number: P95000073253

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)

William D. Collinsworth

2652 N. McMullen Booth Rd., #1133

Clearwater, FL 33761

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Larry Finkle

4645 Gilronan Ct.

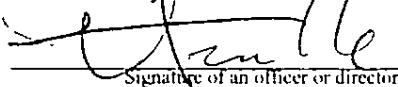
P.O. Box NOT acceptable

Palm Harbor, FL 34685

2019 JAN 28 P 1:17

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

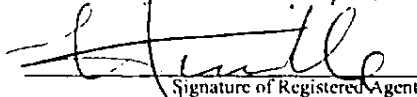
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Larry Finkle

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

01/24/2019

Date

If signing on behalf of an entity:

Typed 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 (03/12)