P96000052804

| (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



200143860132

05/06/09--01016--008 **35.00



Machange Thereis 5-19-09,

COVER LETTER

| Division of Corporations | | |
|---|--------------------------------|----------|
| SUBJECT: NETWORK CONNECTIONS USA INC (Name of Corporation) | - | |
| DOCUMENT NUMBER: P9600052804 | - | |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for f | iling. | |
| Please return all correspondence concerning this matter to the following: | | |
| G. BARKER | | |
| (Name of Contact Person) | - | |
| NCUSA | 2009 AF SECRI TALLA | |
| (Firm/Company) | R 2 | |
| 221 Soldiers CKR | L AM RY OF SSEE F | |
| (Address) | AM 8: DU F STATE FLORIDI |) |
| Longwood, FC 32750 (City/State and Zip Code) | 10¢ 1E 00 |) |
| For further information concerning this matter, please call: | | |
| WR BAYLKER at (427) 321- (Name of Contact Person) at (427) 321- (Area Code & Daytime Tele | 739L | er) |

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



May 7, 2009

G. BARKER NETWORK CONNECTIONS USA INC. 221 SOLDIERS CREEK PLACE LONGWOOD, FL 32750

SUBJECT: NETWORK CONNECTIONS USA INC.

Ref. Number: P96000052804

We have received your document for NETWORK CONNECTIONS USA INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The new registered agent named in six must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Letter Number: 509A00015504

Thelma Lewis
Document Specialist Supervisor



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 24, 2009

G. BARKER NETWORK CONNECTIONS USA INC. 221 SOLDIERS CREEK PLACE LONGWOOD, FL 32750

SUBJECT: NETWORK CONNECTIONS USA INC.

Ref. Number: P96000052804

We have received your document for NETWORK CONNECTIONS USA INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 809A00013888

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 FLORIOR in order to change its registered office or registered agent, or both, in the State of Florida. |
|---|
| 1. The name of the corporation: NETWORK CONNECTIONS WAIWC. |
| 2. The principal office address: 221 SOLDIENS CR PL |
| LONGWOOD, FL 32750 |
| 3. The mailing address (if different): N/A |
| 4. Date of incorporation/qualification: 06 18 1996 Document number: P96 0000 528 04 |
| 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) |
| CORPORATION SERVICE COMPANY |
| CORPORATION SERVICE COMPANY 1201 HAYS STREET |
| 8 III TALLAHASSEE, FL 32301 BIST |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| OF THE BREEDON |
| 121 Soldiers creek l'ace. |
| 221 Soldiers creek Place. (P.O. Box NOT acceptable) Longwood, Fi 32750 |
| 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 arother or director) G. BANKO (Printed or typed name and fille) |
| 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 prefely 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 Recovered Agent) (Signature of Recovered Agent) |
| If signing on behalf of an entity: |
| G. BARKA. |
| (Typed or Printed Name) |

* * * FILING FEE: \$35.00 * * *