

P96 000055389

Florida Department of State

Division of Corporations

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Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850) 205-0380

From:

Account Name : FOWLER, WHITE, GILLEN, BOGGS, VILLAREAL & BANKER, P.A

Account Number : 075410001562

Phone : (813) 228-7411

Fax Number : (813) 228-9401

REGISTERED AGENT CHANGE**ADVANTECH SOLUTIONS VII, INC.**

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$87.50

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

1. The name of the corporation : AdvanTech Solutions VII, Inc.
2. The mailing address of the corporation : 1410 N. Westshore Blvd., Suite 600, Tampa, FL 33609
3. Date of incorporation/qualification: 06/27/96 Document number: P96000055389
4. The name and address of the current registered agent and office:

Michael R. Carey712 S. Oregon AvenueTampa, FL 33606

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):
(P. O. Box Not Acceptable)

Brian Nugent1410 N. Westshore Blvd., Suite 600Tampa, FL 33607

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.

(Signature of an officer, chairman or vice chairman of the board)

10/17/01
(Date)

David Volpi, President

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

(Signature of Registered Agent)

10/17/01
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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

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DIVISION OF CORPORATIONS

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