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Florida Department of State
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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : CORPDIRECT AGENTS, INC.
Account Number : 110450000714
Phone : (850) 222-1173
Fax Number : (850) 224-1640

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: requests@nrai.com

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE
G.E.B. COMPUTER TRAINING, INC.

Certificate of Status	0
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Page Count	02
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PA Change

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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, 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: G.B.B. COMPUTER TRAINING, INC.
2. The principal office address: 7757 W FLAGLER ST, #200, MIAMI FL 33144 US
3. The mailing address (if different): 100 S. PINE ISLAND DRIVE, #200, PLANTATION FL 33324 US
4. Date of incorporation/qualification: 10/22/1996 Document number: P96000087363
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)
SNIDER LERMAN BENTE & WHITEBROOK, PA
2611 HOLLYWOOD BLVD
HOLLYWOOD FL 33020 US
6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):
NRAI SERVICES, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
P.O. Box NOT acceptable

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]
 Signature of an officer or director

G. J. Bonwick, Pres.
 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.

By: [Signature]
 Signature of Registered Agent

8/31/12
 Date

If signing on behalf of an entity:

MICHELE HOLDEN, ASST SECT
 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

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