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2001 OCT 16 AM 9: 20
SECRETARY OF STATE

R A Change

TB

10-19-07

COVER LETTER

Division of Corporations
SUBJECT: TNT Holdings INC (Name of Corporation)
DOCUMENT NUMBER: P970 660 17711
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:
Antoinette (Towi) Rand (Name of Contact Person)
TNT Holdingo Inc (Firm/Company)
7957 Steeplechase CT (Address)
Port St Lucie, FL 34986 (City/State and Zip Code)
For further information concerning this matter, please call:
Toni Rand at (772) 489-5982 (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

CR2E045 (8/05)

TO:

Amendment Section

Check # 1127

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of statement of change is submitted in order to absence it.	ed for a corporation	organized und	er the laws of the S	State of FL	LORIDA	
in order to change its			ngs, INC.	-	<u>.</u>	
1. The name of the corporation		_	<i>"</i>			
2. The principal office address		,	ie FC		<u> </u>	
2 Th		SAN		37100		
3. The mailing address (if diff	erent):	<u> </u>	· <u> </u>			
4. Date of incorporation/quality	fication: 2-25-	97 Do	cument number: _	P9760	00/77/1	
5. The name and street address Florida Department of State		ered agent and	registered office o	n file with the		
	Timothe	1 Rano	l			
			chase C	-		
			e, FC 3		رے	
	1011 3	Luci	C ₁ 1 C 0	170° 76	品島州	
6. The name and street address (if changed):	s of the new registered	d agent (if chai	nged) and /or regis	tered office	温ら	
<u> </u>	Antoinett.	e CTon	i) Rand	<u> </u>	震器 5	
	7957 S	teepled	hase ct	-	F 57 4 9.	
PORT ST Lucie, FC 34986						
	PORT ST	huar,	+C 5	+70 G	7	
The street address of its regis as changed will be identical.	tered office and the	street address	of the business of	fice of its regi	stered agent,	
Such change was authorized authorized by the board, or the	by resolution duly ac ne corporation has be	dopted by its been notified in	oard of directors writing of the cha	or by an office ange.	er so	
Infonette Co	director)	<u>_A</u>	ntoinette l	L Rand	 	
I hereby accept the appointm I further agree to comply wit of my duties, and I am famili document is being filed mere corporation has been notified	ent as registered age h the provisions of a ar with and accept th ly to reflect a change i in writing of this ch	ent and agree ll statutes rela he obligation o e in the registe hange.	to act in this capa tive to the proper of my position as r red office address	icity. and complete egistered agei s, I hereby con	performance nt. Or, if this ifirm that the	
(Interesto E	Rad		10-11-0	57		
(Signature of Register	ed Agent)		(Date	e)		
If signing on behalf of an ent	ity:					
Antoinette	RAND					
(Typed or Printed N	ame)					

* * * 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 (8/05)