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TRANSMITTAL LETTER

Division of Corporations
SUBJECT: NETWORKED KNOWLEDGE System Inc. (Name of corporation)
DOCUMENT NUMBER: P970000 23613
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:
Stacey J. Balley (Name of person)
(Name of firm/company)
2203 N. LOIS Avenue M 500 (Address)
TAMPA Florion 33607 (City/state and zip code)
For further information concerning this matter, please call:
5790ey J. Barcen at (813) 594 0058 (Name of person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

TO: Amendment Section

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	5,
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	e
1. The name of the corporation: Networks Knowledge Systems, she	٧
2. The principal office address: 2203 N. Lois Avenue M500	
3. The mailing address (if different): PU box 20772	
TAMPA, FlorIDA 33622-0772	
4. Date of incorporation/qualification: 02 97 Document number: P97000734	513
5. The name and street address of the current registered agent and registered office on file with the	
Florida Department of State:	
Exic 5 BRAVICK PA 3	97.5
5634 PADDOCK TRAIL PRIVE SER 23	Ē.
TAMPA, PloriDA 33624 TO 3	
6. The name and street address of the new registered agent (if changed) and /or registered office (i	· C
changed):	1
Stracey J. BAILEY	
2203 N. Lois Avenue M 500 (P.O. Box or personal mailbox NOT acceptable)	
TAMPA Florior 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, or the corporation has been notified in writing of the change.	
(Signature of an officer, chairman or viperchairman of the board) TASON ('Hollowry CRO (Printed or typed name and title)	
I hereby accept the appointment as registered agent and agree to act in this capacity.	
Ffurther 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	
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.	
Dully Ti Bally 4/21/03	
(Signature of Registered Agent) (Date)	
If signing on behalf of an entity:	
(Typed or Printed Name) (Capacity)	

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