97000081987

	(Requestor's Name)				
	(Address)				
	(Address)				
•	(City/State/Zip/Phone #)				
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	,				
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C. Couttiette AUG 0 9 2007

COVER LETTER

TO: Amendment Section , , Division of Corporations
SUBJECT: TNC TNC (Name of Corporation)
DOCUMENT NUMBER: P 970008/987
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:
George Stafisz (Name of Contact Person) TNC, INC (Firm/Company) 464 E, Douglas Rond (Address)
Oldsmar Fl 34677 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (727) 483-9606 (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

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

Pursuant to the provisions of sections 607 statement of change is submitted for a cor				· . /
in order to change its registered	-		•	
1. The name of the corporation:	TNC	INC.		
2. The principal office address: Oldsmar F 346	464 E	1)045 AS	Road	
3. The mailing address (if different):	P.O. B	ox 555	Oldsm	ar, Fl.
4. Date of incorporation/qualification:	9/14/97	Document number:	P97000	08/987
5. The name and street address of the curr Florida Department of State:				
Stafis	z, WAN	DA.	•	
432 1	pheview	Drive		
<u>Oldsmi</u>	er, Fl	34677	 	O7 AL SECH TALL!
6. The name and street address of the new (if changed):	registered agent (i	f changed) and /or regi	stered office	JG -3 KETARY THASSE
Stafis	Z Krysj	L YNA		of s
3172	Bentley'	Drive	··	8: 19 STALE FLORIC
Pa/m	ox NOT acceptable)	Fl. 34684		77
The street address of its registered office as changed will be identical.	and the street add	ress of the business of	fice of its regist	ered agent,
Such change was authorized by resolution authorized by the board, or the corporation				so
(Signature of an officer or director)		George St	name and title)	<u>D</u>
I hereby accept the appointment as regis I further agree to comply with the provis performance of my duties, and I am fami agent. Or, if this document is being filed hereby confirm that the corporation has	tered agent and ag ions of all statutes liar with and acce I merely to reflect of been notified in wi	ree to act in this capa relative to the proper pt the obligation of my a change in the registe riting of this change.	city. and complete position as reg red office addr	gistered ess, I
Kystyna Steefier (Fignature of Registered Agent)		7/3/ (Dat	67	
If signing on behalf of an entity:				
Krystyna 5+cif	152			

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF ST.