P98000093341

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|------------------------------------|---|---|--|
| Mark L. Re | Jaeta, P.A. equestor's Name | | |
| 1000 S. 3 De Lace City/State | Address Address Ale Ale D1 33. Zin Phone # | 9000026 -11/10/ ****** | 3 84669 2 19801075002 10.00 *****35.00 |
| 954-763 | • | Office Use Or | ıly |
| | 3~3 500 NAME(S) & DOCUMENT | NUMBER(S), (if known): | |
| 00200 | - · · · · · · · · · · · · · · · · · · · | <i></i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
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| (Corp | poration Name) | (Document #) | |
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| 3. | | | THE STATE OF THE S |
| (Corp | poration Name) | (Document #) | The line |
| 4(Con | poration Name) | (Document #) | 03/2 |
| | | | 7 |
| ☐ Walk in [| Pick up time | Certified Copy | · |
| Mail out | Will wait Photos | copy Certificate of Statu | s |
| NEW FILINGS | AMENDMENTS | | |
| Profit | Amendment | | |
| NonProfit | Resignation of R.A., Office | Resignation of R.A., Officer/ Director | |
| Limited Liability | Change of Registered Age | Change of Registered Agent | |
| Domestication | Dissolution/Withdrawal | Dissolution/Withdrawal | |
| Other | Merger | | |
| OTHER FILINGS | REGISTRATION | | |
| Annual Report | QUÂLIFICATIO | | |
| Fictitious Name | Foreign | - BAC | ha |
| Name Reservation | Limited Partnership Reinstatement | T BACI | <i>'</i> / <i>'</i> |
| | Trademark | VS NOV 1 | C 1008 |
| | Other | VS NOV 1 | 0 1770 |
| | | | |

Examiner's Initials

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.

| 1a. The name of the corporation is: ALL COM | P DATA SOLUTIONS, INC. |
|---|--|
| | |
| 1b. The mailing address of the corporation is: | 6868 W. Livingston Street, Orlando, Fl. 32835 |
| , • | |
| 1c. Date of incorporation: 11/3/98 | _ Document number: <u>P98000093341</u> |
| | |
| 2. The name and address of the current register | ered agent and office: |
| Filings, Inc. | |
| 3732 N.W. 16th Street | <u> </u> |
| Ft. Lauderdale, Fl. 33311 | |
| | The state of the s |
| 3. The name and address of the new registere | d agent and office: (P.O. Box NOT Aeceptable) |
| Mark L. Gaeta, Esq. | |
| 1000 S. Federal Highway, Suite 103 | |
| Ft. Lauderdale, Fl. 33316 | |
| | |
| The street address of its registered office and the | e street address of the business office of its |
| registered agent, as changed, will be identical. | |
| ~ | 1. (. 11 to be and of the store on by on officer |
| | adopted by its board of directors or by an officer |
| so authorized by the board. | |
| Occu molin | Naviambar 4 1009 |
| | November 4, 1998 (Date) |
| Oscar Molina, President/Director | (Date) |
| | |
| TI I I we remint any I want and to | accent complex of process for the above stated |
| Having been named as registered agent and to | accept service of process for the above sinea |
| corporation, I hereby accept the appointment a | s registered agent and agree to act in this |
| capacity. I further agree to comply with the pr | ovisions of all statutes relative to the proper and |
| complete performance of my duties, and I am f | amiliar with and accept the obligation of my |
| position as registered agent. Hue tu | Name A 1000 |
| | November 4, 1998 (Date) |
| (Signature of Registered Agent) | (Date) |
| Mark L. Gaeta | |
| (Printed or typed name) | 7 Tallahassee, FL 32314 (Filing Fee \$35.00) |
| DIVISION OF COMOUNTAINING P. U. BOX 0.3.4. | /、Lauanassee、FL JZJ14 (FIIII2 TEE ФJJ.VV) |

c:Gaeta\corporat\AllComp\StOfChRe.Agt