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 iilam & Howard, P.A. D North Laura Street uite 2900 acksonville, FL 32202				
		Office Use	e Only	

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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<u>NEW FILINGS</u>	AMENDMENTS	
D Profit	Amendment	0
Not for Profit	Resignation of R.A., Officer/Director	<u> </u>
Limited Liability	Change of Registered Agent	JUN F
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OTHER FILINGS	REGISTRATION/QUALIFICATIO	÷ 50
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Fictitious Name	Limited Partnership	
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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, the undersigned corporation organized under the laws of the State of <u>Florida</u> submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : ____ADS Net, Inc.

2. The mailing address of the corporation : 59 Skyline Drive, Suite 1250,

Lake Mary, Florida 32746

3. Date of incorporation/qualification: <u>12-6-99</u> Document number: <u>P99000105371</u>

4. The name and address of the current registered agent and office:

MOTOLAW, Inc.

50 North Laura Street, Suite 2750

Jacksonville, Florida 32202

5. The name and address of the new registered agent (if changed) and/or registered office (if changed) (P. O. Box Not Acceptable)

Milam & Howard, P.A.

50 North Laura Street, Suite 2900

Jacksonville, Florida 32202

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.

Here Alla	153001	
(Signature of an officer, chairman or vice chairman of the board)	(Date)	
Gary Abram, President	· · · · ·	

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

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h- Mada	< _		5-29-01	
(Signature of Registered Agent)			(Date)	

If signing on behalf of an entity:

G. ALAN HOWARD	PRESIDENT
(Typed or Printed Name)	(Capacity)

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