

ACCOUNT NO.

: 072100000032

REFERENCE

351901

4388149

AUTHORIZATION

COST LIMIT

ORDER DATE: August 24, 1999

ORDER TIME: 11:16 AM

ORDER NO. : 351901-020

CUSTOMER NO: 4388149

CUSTOMER: Ms. Marianne B. Sileo

Emcor Group Inc.

101 Merritt Seven

7th Floor

Norwalk, CT 06851-1059

CHANGE OF AGENT

NAME:

THE POOLE AND KENT COMPANY

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Janine Lazzarini



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

	•	17.0502, 607.1508, or 617.1508, Florida Statute.	5,
Ū	l corporation organized under the law		-
•	•	its registered office or registered agent, or both, i	n
the State of Flo			
1. The name of	the corporation is: THE POOLE AND I	CENT COMPANY	
Ũ	address of the corporation is:1781	NW North River Drive	
		7, 1954 Document number: 810081	
	nd address of the current registered ag		
	Richard C. Carter	-	
	2633 Baccarat Drive		
	Cooper City, FL 33026		- ,
5. The name a	nd address of the new registered agent	and office: (P. O. Box Not Acceptable)	-
	Corporation Service Company		1
	1201 Hays Street		I
	Tallahassee, Florida 32301		
The street add agent, as chang	ress of its registered office and the s ed, will be identical.	treet address of the business office of its registere	bs
authorized by t	be board.	e board) Opted by its board of directors or by an officer so Opted by its board of directors or by an officer so Opted by its board of directors or by an officer so Opted by its board of directors or by an officer so Opted by its board of directors or by an officer so Opted by its board of directors or by an officer so Opted by its board of directors or by an officer so	
	(Printed or typed name and title)		
Having been n corporation, I I further agree performance o registered age	hereby accept the appointment as reg to comply with the provisions of all s f my duties, and I am familiar with an	ot service of process for the above stated istered agent and agree to act in this capacity. It takes relative to the proper and complete d accept the obligation of my position as	
By:	Corol Dolon	August 26, 1999	
	(Signature of Registered Agent)	(Date)	-
If signing on behal	f of an entity:		
	Carol Dolor	Assistant Vice President	
	(Typed or Printed Name)	(Capacity)	
	* * * FILING	FEE: \$35.00 * * *	