

F94000004270

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

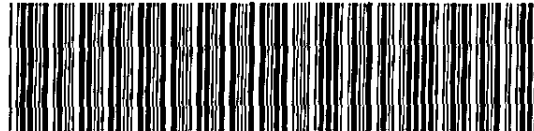
(Business Entity Name)

(Document Number)

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TALIAFERRO COUNTY

CLERK OF COURT
TALIAFERRO COUNTY
OCT 21 2005

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PCI Staff Leasing, Inc.
(Name of corporation)

DOCUMENT NUMBER: F94000004270

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:

Isabel Burgos on behalf of Incorp Services, Inc.
(Name of contact person)

Incorp Services, Inc.
(Firm/Company)

3155 East Patrick Lane, Suite 1
(Address)

Las Vegas, NV 89120-3481
(City/state and zip code)

For further information concerning this matter, please call:

Isabel Burgos at (702) 866-2500
(Name of contact person) (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
409 E. Gaines Street
Tallahassee, FL 32399

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SECRETARY OF STATE
TALLAHASSEE, FL 0911

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

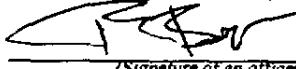
Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of New Jersey in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: PCI Staff Leasing, Inc.
2. The principal office address: 303 Molnar Dr. , Elmwood Park, NJ 07407
3. The mailing address (if different): _____
4. Date of incorporation/qualification: Aug 17, 1994 Document number: F94000004270
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Incorp Services, Inc.
18450 NE 2nd Ave.
(P.O. Box NOT acceptable)
Miami, FL 33179

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SECRETARY OF STATE
TALLAHASSEE, FL 32301

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 or director)

Robert Boffa Jr. President
(Printed or typed name and title)

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. 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.


on behalf of Incorp Services, Inc.
(Signature of Registered Agent)

September 14th, 2005
(Date)

If signing on behalf of an entity:

Isabel Burgos D.
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314