

ACCOUNT NO. : 072100000032

REFERENCE: 475265 8316A

AUTHORIZATION~

COST LIMIT : \$ 35.00

ORDER DATE: July 25, 1997

ORDER TIME : 10:36 AM

ORDER NO. : 475265-030

CUSTOMER NO: 8316A

CUSTOMER: Mr. Robert Calabro

Accustaff Incorporated 177 Crossways Park Drive

Woodbury, NY 11797

CHANGE OF AGENT

NAME: SPECIAL COUNSEL, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Daniel W Leggett

201

John Charles 23

800002252478--1

Florida Department of State, Jim Smith, Secretary of State

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

AGENT ON BOTT	I I ON COM C	IIA I IOI43			
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 submits the following statement in order to change its registered office					
or registered agent, or both, in the Stat	e Florida.				
1a. The name of the corporation is:					_
SPECIAL COUNSEL, INC. P/k/A ATTORNOON (OR 1150 INC.					
1b. Date of incorporation: 2/23/96	Document number				
2. The name and address of the current c t corporation system	nt registered agen	t and office:	SECKE.	الال 97	
1200 SO. PINE ISLAND DRIVE PLAN	ITATION	FL	YSSI YSSI	ယ္အ 0332	4 4 T
3. The name and address of the new r (P.O. Box Not Acceptable	-	nd office:	U. SI	PH 3:	
CORPORATION SERVICE COMPANY			BA.	<u></u>	
1201 Hays Street, Tallahassee, Florida 32301	·		DE A		
The street address of its registered agent 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.					
·					
<i>M</i>	ROBERT CALABRO VICE PRESIDENT-TAXES				
SIGNATURE	Typed or printed name and title				
7/18/15					
DATE					
HAVING BEEN NAMED AS REGISTERE PROCESS FOR THE ABOVE STATED OF IN THIS CERTIFICATE, I HEREBY ACC AGENT AND AGREE TO ACT IN THIS WITH THE PROVISIONS OF ALL STAT PLETE PERFORMANCE OF MY DUTIES THE OBLIGATION OF MY POSITION A	CORPORATION AT EPT THE APPOINT CAPACITY. I FU! UTES RELATIVE I, AND I AM FAM S REGISTERED A CORPO Lisa SIGNATURE BY;	T THE PLACE DE TMENT AS REGI RTHER AGREE T TO THE PROPER ILLIAR WITH AN GENT. RATION SERVICE G MULLIGAR	ESIGNA ISTEREI O COM R AND (D ACCE	TED D IPLY COM- EPT	
	DATE				