

K68365

Document Number Only

CT Corporation System
660 East Jefferson Street
Tallahassee, FL 32301
850-222-1092

400003242514--8
-05/08/00--01071--017
*****35.00 *****35.00

Corporation(s) Name

PA Change
Access Specialties, Inc.

- | | | |
|--|--|--|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merge |
| <input type="checkbox"/> Nonprofit | <input type="checkbox"/> Dissolution | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Foreign | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Reservation | <input checked="" type="checkbox"/> Ch. RA |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> UCC |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Photocopies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Will Wait | |
| <input checked="" type="checkbox"/> Walk in | <input type="checkbox"/> Pick-up | |

FILED
00 MAY -8 PM 2:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
00 MAY -8 AM 11:42
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Name Availability: 5/8/00
Document Examiner: AR
Updater: AR
Verifier: _____
Acknowledgement: _____
W.P. Verifier: _____

MAY - 8

Please Return Extra
Copies File Stamped
To:
Melanie Strickland

Thank You!

Florida Department of State, Jim Smith, Secretary of State

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: Access Specialties, Inc

1b. Date of incorporation 2-24-89 Document number K68365

2. The name and address of the current registered agent and office:
Wayne
William Oren Erickson, 777 South Federal Highway
Pompano Beach, FL 33062

3. The name and address of the new registered agent and office:
(P.O. Box Not Acceptable)
C T CORPORATION SYSTEM

c/o C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation Florida 33324

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.

Wayne Erickson
Wayne Erickson, President
SIGNATURE (Type or printed name and title)
5-1-00
DATE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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.

C T CORPORATION SYSTEM
SIGNATURE BY: Michele R. Justesen, Asst. Secy.
(Registered Agent) Michele R. Justesen, Asst. Secy.
DATE May 5, 2000

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (7-91)

Filing Fee: \$35.00

FILED
00 MAY -8 PM 2:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA