5000000237



ACCOUNT NO. : 072100000032

REFERENCE :

392317 7194507

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE: September 29, 1999

ORDER TIME : 12:04 PM

ORDER NO. : 392317

CUSTOMER NO: 7194507

CUSTOMER:

Ms. Susan Stumpf

Tri-state Employment Service

160 Broadway Fl 15

New York, NY 10038

CHANGE OF AGENT

NAME: STS GROUP, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY ___ PLAIN STAMPED COPY

CONTACT PERSON: Erika Carlson

000003001910--3 -10/01/99--01001--001

*****35.00 *****35.00

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 Stather the undersigned corporation organized under the laws of the State of $_{ t FLORIDA}$	tutes,	
submits the following statement in order to change its registered office or registered agent, or bo	th. in	
the State of Florida.	,	
1. The name of the corporation is: STS GROUP, INC.		
2. The mailing address of the corporation is: 160Broadway 15th T		
<u> </u>		
3. Date of incorporation/qualification: 12/30/94 Document number: P95000000237		
4. The name and address of the current registered agent and office:	DIVISION OF CORPORT	
CARTNEY, CALVERT	节 影	
2202 6TH STREET WEST	30	
PALMETTO, FLORIDA 34209	OF BY COMPON	
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)	Ŧ,	
Corporation Service Company	22	
1201 Hays Street		
Tallahassee, Florida 32301		
The street address of its registered office and the street address of the business office of its registagent, as changed, will be identical.		
Such change was authorized by resolution duly adopted by its board of directors or by an officer authorized by the board.	so	
9/28/99		
(Signature of an officer, chairman or vice chairman of the board) (Date)	_	
Robert Carrea, 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.		
By: School R. Olly 9-30-99 (Signature of Registered Agent) (Date)	-	
If signing on behalf of an entity: Laura R. Duniap as its agent		
(Typed or Printed Name) (Capacity)		
* * * FILING FEE: \$35.00 * * *		

CR2EO45(7/97)