

P97000024858

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*R.A. Charge*  
C.COULLETTE

APR 13 2011

EXAMINER

**NRAI CORPORATE SERVICES, INC.**  
**An affiliate of National Registered Agents, Inc.**  
**1638 Pennsylvania Street**  
**Denver, CO 80203**  
**888-967-5799**  
**Fax: 303-393-8900**

April 7, 2011

Amendment Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

RE: **GEO-CORP, INC.**

Enclosed is the following for filing in your office:

**Statement of Change of Registered Agent—Foreign Corp.**  
**Check for \$35.00**

Please return evidence of the change of agent to the address above. If, for any reason, the filing cannot be made, please call the toll-free number listed above or contact me by e-mail.

Regards,



Teri Stapleton  
Client Specialist  
tstapleton@nrai.com

Enclos.

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** GEO-CORP, INC.  
Name of Corporation

**DOCUMENT NUMBER:** P97000024858

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:

TERI STAPLETON  
Name of Contact Person

NRAI CORPORATE SERVICES, INC.  
Firm/Company

1638 PENNSYLVANIA ST.  
Address

DENVER, CO 80203  
City/State and Zip Code

samk@isbmtg.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TERI STAPLETON at ( 888 ) 967-5799  
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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: GEO-CORP, INC.
2. The principal office address: 901 CORPORATE CENTER DR SUITE 401  
MONTEREY PARK CA 91754
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 03/19/1997 Document number: P97000024858
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

MICHAEL MIRRIONE  
2731 EXECUTIVE PARK DR SUITE 4  
WESTON FL 33331

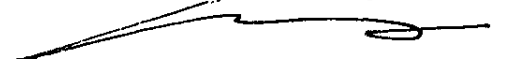
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NRAI Services, Inc  
515 East Park Avenue  
P.O. Box NOT acceptable  
Tallahassee, FL 32301

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 APR 12 AM 11:31

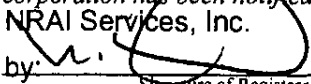
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

STEPHEN KANG, CEO  
\_\_\_\_\_  
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.*

NRAI Services, Inc.  
by:   
\_\_\_\_\_  
Signature of Registered Agent

4/7/11  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

Michael Mirrione, Asst. Secretary  
\_\_\_\_\_  
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