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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C T Corporation System.

Requestor's Name  
660 East Jefferson Street

Address  
Tallahassee, FL 32301 222-1092

City State Zip Phone

CORPORATION(S) NAME

600002579186--8  
-07/02/98--01061--021  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Omicron Technologies, Inc.

- Profit
- NonProfit
- Limited Liability Company
- Foreign
- Limited Partnership
- Reinstatement
- Limited Liability Partnership
- Certified Copy
- Call When Ready
- Walk In
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- Amendment
- Dissolution/Withdrawal
- Annual Report
- Reservation
- Photo Copies
- Call if Problem
- Will Wait
- Merger
- Mark
- Other
- Change of P.A.
- Fictitious Name
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DIVISION OF CORPORATIONS

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~~W 98-13307~~  
7/8/98



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

July 6, 1998

CT CORPORATION SYSTEM

TALLAHASSEE, FL

SUBJECT: OMICRON TECHNOLOGIES, INC.  
Ref. Number: W98000015307

We have received your document for OMICRON TECHNOLOGIES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records show no entity by this name.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6880.

Karen Gibson  
Corporate Specialist

Letter Number: 798A00036124

**Document Number Only**

C T CORPORATION SYSTEM

660 East Jefferson Street

Requestor's Name

Tallahassee, Florida 32301

Address

(850) 222-1092

City State Zip Phone

**CORPORATION(S) NAME**

*All-Nations Catering, Inc*

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Profit                        | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger                               |
| <input type="checkbox"/> NonProfit                     |   |   |
| <input type="checkbox"/> Limited Liability Company     |   |   |
| <input type="checkbox"/> Foreign                       | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark                                 |
| <input type="checkbox"/> Limited Partnership           | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other                                |
| <input type="checkbox"/> Reinstatement                 | <input type="checkbox"/> Fict. Filing           | <input checked="" type="checkbox"/> Change of R.A.            |
| <input type="checkbox"/> Limited Liability Partnership |   | <input type="checkbox"/> ucc-1 <input type="checkbox"/> ucc-3 |
| <input type="checkbox"/> Certified Copy                | <input type="checkbox"/> Photo Copies           | <input type="checkbox"/> CUS                                  |
| <input type="checkbox"/> Call When Ready               | <input type="checkbox"/> Call if Problem        | <input type="checkbox"/> After 4:30                           |
| <input checked="" type="checkbox"/> Walk In            | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up                   |
| <input type="checkbox"/> Mail Out                      |   |   |

DIVISION OF CORPORATE AFFAIRS  
 SEP 11 7 18 PM '80

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W.P. Verifier

717

**Please Return Extra Copy(s) Filed Stamp**

Thanks, Melanie ☺

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: All-Nations Catering, Inc.

1b. Date of incorporation February 2, 1988 Document number 213481

2. The name and address of the current registered agent and office:

Mark J. Bryn

Two South Biscayne Blvd., One Biscayne Tower, Suite 3599, Miami, FL 33131

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.

[Signature]  
SIGNATURE

B.F. Skemon - President  
(Type or printed name and title)

\_\_\_\_\_  
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: [Signature]  
Jack Caskey, Assistant Vice President (Registered Agent)

DATE June 22, 1998

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

CR2E045 (7-91)

Filing Fee: \$35.00

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98 JUN -7 PM 2:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA