

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

217838

The Wackenhut Corporation

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-08/09/02--01048--014

1912.50 **43.75

RA
Change

Art of Inc. File

LTD Partnership File

Foreign Corp. File

L.C. File

Fictitious Name File

Trade/Service Mark

Merger File

Art. of Amend. File

✓ ~~Change~~
RA ~~Resignation~~

Dissolution / Withdrawal

Annual Report / Reinstatement

✓ Cert. Copy

Photo Copy

Certificate of Good Standing

Certificate of Status

Certificate of Fictitious Name

Corp Record Search

Officer Search

Fictitious Search

Fictitious Owner Search

Vehicle Search

Driving Record

UCC 1 or 3 File

UCC 11 Search

UCC 11 Retrieval

Courier

FILED
02 AUG -9 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
02 AUG +9 AM 11:17
DIVISION OF CORPORATION

RR
8/9/02

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

**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: THE WACKENHUT CORPORATION
2. The principal office address: 4200 Wackenhut Dr., #100, Palm Beach Gardens, FL. 33410-4243
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/4/58 Document number: 217838

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

F.E. Finizia
4200 Wackenhut Dr., #100
Palm Beach Gardens, FL. 33410-4243

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

Robert L. Kilbride
4200 Wackenhut Dr., #100
(P.O. Box or personal mailbox NOT acceptable)
Palm Beach Gardens, FL. 33410-4243

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02 AUG -9 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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] President & Chief Executive Officer
(Signature of an officer, chairman or vice chairman of the board) (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.

[Signature]
(Signature of Registered Agent)

7/25/02
(Date)

If signing on behalf of an entity:

Robert L. Kilbride
(Typed or Printed Name)

V.P. & Associate General Counsel
(Capacity)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314