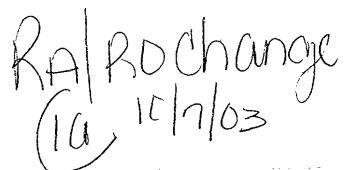
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| (Requestor | s Name) |
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| Certified Copies Ce | ertificates of Status |
| Special Instructions to Filing Off | īcer: |
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STITES & HARBISON PLLC

400 West Market Street Suite 1800 Louisville, KY 40202-3352 15021 587-3400 15021 587-6391 Fax www.stites.com

September 24, 2003

Joyce A. Borden (502) 681-0335 (502) 779-8384 FAX jborden@stites.com

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

RE: Carr Smith Associates, Inc., Engineers, Architects, Planners

Dear Sir/Madam:

Please find enclosed an original and two copies of a Statement of Change of Registered Office or Registered Agent or Both for the above-referenced entity, along with this firm's check in the amount of \$35.00 for the appropriate filing fee. Kindly file this Statement with your office and return a file-stamped copy to me in the self-addressed, postage prepaid, envelope enclosed for your convenience.

I thank you in advance for your assistance. If you should have any questions, please do not hesitate to call me.

Very truly yours,

STITES & HARBISON PLLC

Toyce A. Borden

Paralegal

Enclosures

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A ANGERAL FLORIDA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| | e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, of change is submitted for a corporation organized under the laws of the State ofin order to change its registered office or registered agent, or both, in the State |
|--------------------------------|--|
| of Florida. | |
| 1. The name of | the corporation: Carr Smith Associates, Inc., Engineers, Architects, Planners |
| 2. The principa | office address: 4055 NW 97th Avenue, Suite 200, Miami, Florida 33178 |
| 3. The mailing | address (if different): |
| 4. Date of inco | rporation/qualification: 01/14/96 Document number: 300875 |
| | nd street address of the current registered agent and registered office on file with the artment of State: Barry Boren, Esq. |
| | 9200 S. Dadeland Blvd., Suite 412 |
| | Miami, Florida 33156 |
| 6. The name a changed): | nd street address of the new registered agent (if changed) and /or registered office off |
| | Joseph M. Corradino |
| | 4055 NW 97th Avenue, Suite 200 (P.O. Box or personal mailbox NOT acceptable) |
| | Miami, Florida 33178 |
| The street addragent, as chang | ress of its registered office and the street address of the business office of its registered ged will be identical. |
| Such change wanthorized by t | ras authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change. |
| //· | Burt J. Deutsch, President |
| | the appointment as registered agent and agree to act in this capacity to comply with the provisions of all statutes relative to the proper and complete fmy duties, and I am familiar with and accept the obligation of my position as at. Or, if this document is being filed merely to reflect a change in the registered I hereby confirm that the corporation has been notified in writing of this change. |
| H signing on beha | Signature of Registered Agent) 9-24-03 (Date) |
| | |
| • | Typed or Printed Name) (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 |