

ACCOUNT NO. : 072100000032

REFERENCE: 051267 7111512

AUTHORIZATION :

COST LIMIT

ORDER DATE : December 3, 1998

ORDER TIME : 12:56 PM

ORDER NO. : 051267

CUSTOMER NO: 7111512

400002703624--9

CUSTOMER: Ms. Stephanie A. Thomas

Coach Usa One Riverway Suite 500

Houston, TX 770561903

CHANGE OF AGENT

NAME: PARA-TRANSIT, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY _ PLAIN STAMPED COPY

CONTACT PERSON: Cassandra Lamm

EVISIAN OF CORPORATION

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Florida Department of State, Sandra B. Mortham, Secretary of State

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

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

Pursuant to th	ne provisions of sections 607.0502, 617.0502, 607.	1508, or 617.1508	Florida Statutes, the
	orporation organized under the laws of the State of		lorida
submits the fol	llowing statement in order to change its registered	office or registered	d agent, or both, in the
State of Florid			
	f the corporation is:		
2. The mailing	address of the corporation is: SUITE 500, ONE	RIVERWAY	
HOUSTON,	TX 77056		
3. Date of inco	prporation/qualification: July 23, 1980	Document number:	679519
4. The name a	nd address of the current registered agent and office	• •	
	AARON J. GOLD		
	704 WEST BAY STREET		THE SECOND
	TAMPA, FL 33606		題に
5. The name ar	nd address of the new registered agent and office: (F	P. O. Box Not Acce	eptable)
	Corporation Service Company		TEST =
	1201 Hays Street		986
	Tallahassee, FL 32301		
The street add agent, as chan	ress of its registered office and the street address ged, will be identical.	of the business of	fice of its registered
Such change value of authorized by	vas authorized by resolution duly adopted by its the board. Anical Ahirman	poard of directors	or by an officer so
(Signature	of an officer, chairman or vice chairman of the board)		(Date)
STEPHANIE A. :	THOMAS, Assistant Secretary		
	(Printed or typed name and title)		(Date)
corporation, 1 I further agree	amed as registered agent and to accept service of hereby accept the appointment as registered age to comply with the provisions of all statutes relaying the my duties, and I am familiar with and accept the the complexity of the	nt and agree to ac ttive to the proper	t in this capacity. and complete
	Service Company Alen B. M. A.	, 12	14/98
(Signature of Registered Agent)	(Date)	7
If signing on beh	alf of an entity:		
KAREN B. ROZA	R	Assistant Vice	President
	(Typed or Printed Name)	(Canacit	