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Phone I(S) NAME	100002853231 -04/27/3901051011 ****875.00 *****35.
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() Annual Report () Reservation	(1) Others
() Call if Problem () Will Wait	() After 4:30 XX Pick Up
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	Phone I(S) NAME () Amendment () Dissolution/Wit () Annual Report () Reservation rship () Photo Copies () Call if Problem

CR2E031 (1-89)

W.P. Verifler

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 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: PIM, Inc.
1b. Date of incorporation July 1, 1976 Document number 27 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
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. R. Jeffrey Bixler, Vice Pres. & Secy. (Type or printed name and title) DATE DATE TO ACCEPT SERVICE OF
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. SIGNATURE BY: SIGNATURE BY: Gil S. Apelis, Asst. Secretary (Registered Agent) DATE
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

Filing Fee: \$35.00

(FLA. - 2194 - 3/4/92)

CR2E045 (7-91)