

ACCOUNT NO.

072100000032

REFERENCE

447971

4611782

AUTHORIZATION

COST LIMIT

\$ 35.00

ORDER DATE :

July 1, 1997

ORDER TIME : 12:21 PM

ORDER NO. : 447971-005

8000002230218--8

CUSTOMER NO:

4611782

CUSTOMER:

William W. Hopson, Esq

Varner Stephens Humphries &

Suite 1700 Riverwood 3350 Cumberland Circle Atlanta, GA 30339

CHANGE OF AGENT

NAME:

WILLIAMS AND ASSOCIATES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Stscherban

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

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

	ne provisions of sections 607.0502, 617.0502, 607.150 ed corporation organized under the laws of the State			tatut	es,
_	ollowing statement in order to change its registered office			both,	in
1a. The nam	e of the corporation is: WILLIAMS AND ASSOCIATES, INC	. aka: WILLIAM	S-CLIFTON	<u> </u>	
& ASSOCIATE	S INC.				
1b. The mail	ing address of the corporation is: 535 Coliseum I	rive	****		
	Macon, GA 3120)1			
1c. Date of i	ncorporation: 7/26/1968 Document numbe	r: 8520423	SEG	97	
2. The name and address of the current registered agent and office:		:		JUL -3	FE
	Debra S. Clifton	_		ω ⊒2	
	117 Oak Street		59	다 다 10	_
•	Altamonte Springs, FL 32714		13.3	5	
3. The name	and address of the new registered agent and office:(P.	O. Box Not Ac	ceptable)		
	Corporation Service Company				
	1201 Hays Street, Suite 105				
	Tallahassee, Florida 32301				
	dress of its registered office and the street address of ent, as changed, will be identical.	the business	office of	its	
	was authorized by resolution duly adopted by its board by the board.	i of directors of	r by an of	ficer	
Som	Vonlliens	6-24	-97		
	e of an officer, chairman or chairman of the board)	(Date)			
FLOYO B.	WILLIAMS, CEO r typed name and title)				
corporation, I capacity. I ful complete per	named as registered agent and to accept service of pro hereby accept the appointment as registered agent ar rther agree to comply with the provisions of all statute formance of my duties, and I am familiar with and acc gistered agent.	nd agree to act es relative to th	in this e proper a	and	
Corporation Serv	rice Company				
By: // (Signature	a of Registered Agenti	ULY 2, 1997 (Date)		-	
	oehalf on an entity:	(Date)			
LISA G. MU	ILLIGAN ASST	. VP			

(Capacity)

(Typed or Printed Name)