

ACCOUNT NO. : 072100000032

REFERENCE

977636

5167317

AUTHORIZATION

COST LIMIT

\$ 35.00

ORDER DATE : October 16, 2001

ORDER TIME: 9:39 AM

ORDER NO. : 977636-850

CUSTOMER NO: 5167317

CUSTOMER: Ms. Colleen Darling

The Clark Construction Group

7500 Old Georgetown Road

Bethesda, MD 20814

CHANGE OF AGENT

NAME: CLARK ENTERPRISES, INC.

800004695328--

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY ___ PLAIN STAMPED COPY

CONTACT PERSON: Ellyn Herndon

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

Pursuant to the provisions of sections 607.0502, 617.0502, 60 the undersigned corporation organized under the laws of the Sta	7.1508, or 617.1508, Florida Statutes, te of Maryland
submits the following statement in order to change its registered	
the State of Florida.	
1. The name of the corporation : CLARK ENTERPRISES, INC. OF	MARYLAND
2. The mailing address of the corporation:	
7500 Old Georgetown Road, 15th Floor, Bethesda, MD 2	0814-6195
3. Date of incorporation/qualification: Maryland	Oocument number: 849274
4. The name and address of the current registered agent and office	;
C T Corporation System	
1200 S. Pine Island Road	
Plantation, FL 33324	
5. The name and address of the new registered agent (if changed) (P. O. Box Not Acceptable)	and/or registered office (if changed):
Corporation Service Company	FG B T
1201 Hays Street	W 2
Tallahassee, Florida 32301	SHE P D
The street address of its registered office and the street address agent, as changed, will be identical.	
Such change was authorized by resolution duly adopted by its be authorized by the board.	pard of directors or by arcefficerso
(Signature of an officer, chairman or vice chairman of the board)	Oct-15,2001
(Signature of an officer, chairman of vice chairman of the board)	(Date)
Lawrence C. Nussdorf, President (Printed or typed name and title)	<u> </u>
Having been named as registered agent and to accept service of corporation, I hereby accept the appointment as registered agen I further agree to comply with the provisions of all statutes relat performance of my duties, and I am familiar with and accept the registered agent.	process for the above stated it and agree to act in this capacity. ive to the proper and complete obligation of my position as
Coucl K Oclo— (Signature of Registered Agent)	11-19-2001
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
Carol K. Dolor (Typed or Printed Name)	Asst. Vice President (Capacity)
, , , , , , , , , , , , , , , , ,	• •
* * * FILING FEE: \$35.00 * * *	
CP2E045(0)00\	

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314