

# 852141

CAPITOL SERVICES d/b/a  
PARALEGAL & ATTORNEY SERVICE BUREAU, INC.

(Requestor's Name)

1406 Hays Street, Suite 2

(Address)

Tallahassee, FL 32301 (904) 656-3992

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

FILED  
00 MAR -7 AM 11:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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-03/07/00--01042--016

\*\*\*\*\*35.00 \*\*\*\*\*35.00

## CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. PMI Imaging Systems, Inc. 852141  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 3/7

☐ Certified Copy

☐ Mail out

☐ Will wait

☒ Stamped  
Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input checked="" type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

G. COULLETTE MAR 07 2000

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

00 MAR -7 AM 10:55

RECEIVED

# 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 New Jersey submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: PMI Imaging Systems, Inc.
2. The mailing address of the corporation is: 3232 McKinney Avenue, Suite 900  
Dallas, Texas 75204
3. Date of incorporation/qualification: 3/10/82 Document number: 832141
4. The name and address of the current registered agent and office:

CT Corporation System

c/o CT Corporation System, 1200 South Pine Island Road

Plantation, Florida 33324

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

United Corporate Services, Inc.

9200 South Dadeland Blvd. - Suite 508

Miami, Florida 33156

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TALLAHASSEE, FLORIDA

The street address of its registered office 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.

Margot T. Lebenberg  
(Signature of an officer, chairman or vice chairman of the board)

3-3-00  
(Date)

Margot T. Lebenberg, Vice President

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

By: Michael A. Barr  
(Signature of Registered Agent)

3-3-00  
(Date)

If signing on behalf of an entity:

Michael A. Barr

(Typed or Printed Name)

President

(Capacity)

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