

BOY060000402

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

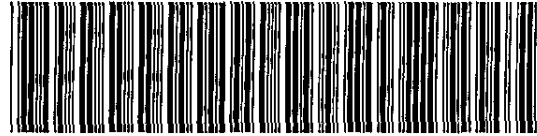
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 135387 7377689

AUTHORIZATION :

Patricia Pigato

COST LIMIT : \$ 35.00

ORDER DATE : January 10, 2005

ORDER TIME : 2:41 PM

ORDER NO. : 135387-185

CUSTOMER NO: 7377689

CUSTOMER: Ms. Kathryn Bernard
Cbs Personnel Services Llc
Suite 300
435 Elm Street
Cincinnati, OH 45202

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

CHANGE OF AGENT

NAME: VENTURI TEXAS STAFFING
PARTNERS, LP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight

LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. VENTURI TEXAS STAFFING PARTNERS, LP
Name of the limited partnership

2. 09/21/2004 Date of filing/registration in Florida
3. B04000000402 Document number assigned

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

C T Corporation System
Name
1200 South Pine Island Road
Address
Plantation, FL 33324
City, State and Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5. The name and address of the new registered agent and/or office:

Corporation Service Company
Name
1201 Hays Street
Florida street address (P.O. Box **not** acceptable)
Tallahassee FL 32301
City, State and Zip

6. Such change(s) was/were authorized by the general partners.

Kathryn S. Bernard
Signature of General Partner

Kathryn S. Bernard, Asst. Secretary of Venturi Staffing Partners, Inc., General Partner
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 obligations of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.

Corporation Service Company
Elizabeth A. Dawson
Signature of Registered Agent
Elizabeth A. Dawson, Asst. Vice President

**Make checks payable to Florida Department of State and mail to:
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
Filing Fee: \$35.00**