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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certifiçates	of Status
Special instructions to	Filing Officer:	
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Office Use Only



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CECRETARY OF STATE

PA Change 05/10/04

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: ChemCore, Inc. (Name of corporation)
#0000002/28
DOCUMENT NUMBER:
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Traci Smith
(Name of person)
National Service Information, Inc.
(Name of firm/company)
145 Baker Street
(Address)
Marion, OH 43302
(City/state and zip code)
For further information concerning this matter, please call:
Traci Smith at (740) 387-6806 Ext 118 (Name of person) (Area code & daytime telephone number)
(Name of person) (Area code & daytime telephone humber)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

CR2E045(09/03)



April 29, 2004

To Whom It May Concern:

Please file the enclosed change of agent form and return a date stamped copy to my attention. I have enclosed a self address envelope for your convenience.

Should you have any questions, please do not hesitate to contact me. The number I can be reached at is 1-800-235-0337 x 118.

Sincerely,

Trací Smíth Corporate Services

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 Schange is submitted for a corporation organized under the laws of the State of Ohio to change its registered office or registered agent, or both, in the State of Florida.	Statutes, this statement of in order
I. The name of the corporation: ChemCore, Inc.	
2. The principal office address: 9940 Currie Davis Drive, Suite C	
Tampa, FL 33619	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 5/02/2000 Document number: F0000	0002428
5. The name and street address of the current registered agent and registered office on file with Florida Department of State:	th the
CT Corporation System	
1200 South Pine Island Rd.	
Plantation, FL 33324	
6. The name and street address of the new registered agent (if changed) and /or registered off (if changed): NRAI Services, Inc.	35 10 10 10 10 10 10 10 10 10 10 10 10 10
526 E. Park Avenue (P.O. Box or personal mailbox NOT acceptable)	CRET MAY
Tallahassee, FL 32301	ARY ARY
The street address of its registered office and the street address of the business office of it changed will be identical.	s registered agent, as
Such change was authorized by resolution duly adopted by its board of directors or by an the board, or the corporation has been notified in writing of the change.	officer so authorized by
(Signature of an officer or director) (Printed or typed)	•
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 conduties, and I am familiar with and accept the obligation of my position as registered agen being filed merely to reflect a change in the registered office address, I hereby confirm the been notified in writing of this change.	plete performance of my it. Or, if this document is at the corporation has
by: Melod frama 4/28/ (Signature of Registered Agent)	o U
If signing on behalf of an entity:	,
	ecretary

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