## F00000003104



ACCOUNT NO. :

072100000032

REFERENCE: 708212

AUTHORIZATION

COST LIMIT

\$ 35.00

ORDER DATE: January 15, 2002

ORDER TIME: 8:59 AM

ORDER NO. : 708212-380

CUSTOMER NO: 4330643

CUSTOMER: Mr. Skip Mcgovern

Omnicom Group, Inc. 437 Madison Avenue

9th Floor

New York, NY

## CHANGE OF AGENT

NAME: THE AD TEAM OF FLORIDA INC.

800004787858--4

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CONTACT PERSON: Ellyn Herndon

C. Coulliste JAN 22 2002

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

	ovisions of sections 607.0502, 617.0502, 607.1508, or 617	
	poration organized under the laws of the State of Delaware	
	ng statement in order to change its registered office or regi.	sierea ageni, or boin, in
the State of Florida.		
1. The name of the	corporation is: THE AD TEAM OF FLORIDA INC.	
<u> </u>		
2. The mailing addr	ress of the corporation is: 2220 WEST COMMERCIAL BLVD., S	UITE 300
FORT LAUDERDA	ALE FL 33309	
3. Date of incorpora	ration/qualification: June 1, 2000 Document num	nber: <u>F00000003104</u>
4. The name and ad	ddress of the current registered agent and office:	
<u>Uni</u>	ited Corporate Services, Inc.	2002 SEC TALL
920	00 South Dadeland Boulevard, Suite 508	JAN 22 ARETARY AHASSE
	ami, FL 33156	FIL 22 SSE SSE
5. The name and ad	ddress of the new registered agent and office: (P. O. Box Not	Acceptable) $\Box \Box \Box$
Corporation Service Company		AM IO: OF STATIFICATION FLORI
120	01 Hays Street	: 59 : 10 : 10 : 10
Ta	llahassee, Florida 32301	
The street address agent, as changed, v	of its registered office and the street address of the busines will be identical.	s office of its registered
Such change was a authorized by the be	authorized by resolution duly adopted by its board of direct	ors or by an officer so
authorized by the board.		
(Signature of an officer, chairman or vice chairman of the board) (Date)		(Date)
Ducca A And C.		
(Printed or typed name and title) Ray McGovern, Asst. Secretary		
corporation, I here	d as registered agent and to accept service of process for the by accept the appointment as registered agent and agree to a comply with the provisions of all statutes relative to the proper duties, and I am familiar with and accept the obligation of m	above stated ict in this capacity. r and complete
, egiste, en agem.	Paral K Opt	1-18-02
By: (Sig	gnature of Registered Agent) (Date)	
If signing on behalf of a	n entity:	
Carol K. Dolor_Assistant Vice President		
(Typed or Printed Name) (Capacity)		
* * * FILING FEE: \$35.00 * * *		

CR2EO45(7/97)