

Florida Department of State

Division of Corporations Public Access System

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TO:

Division of Corporations

Fax Number

: (B50)617-6380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)694-1639

REGISTERED AGENT CHANGE

ABLEST INC.

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(561) 694-8107

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

Pursuant to the provisions of section 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

The name of the corporation is: Ablest, Inc.		,
2. The principal office address: 1511 NORTH WEST	SHORE BLVD SUITE 900	
TAMPA FL 33607		
3. The mailing address (if different):		
		F01000001102
4. Date of incorporation/qualification:		-
5. The name and street address of the current registere Florida Department of State:	d agent and registered office of	on the with the
CORPORATION SERVICE COMPANY		
1201 HAYS STREET		
TALLAHASSEE FL 32301		
6. The name and street address of the new registered a (if changed):	gent (if changed) and /or regi	stered office
Corporate Creations Network Inc.		
11380 Prosperity Farms Road #221E		
(P.O. Box Not accepta Palm Beach Gardens FL 33410	ble)	
The street address of its registered office and the stagent, as changed will be identical.		
Such change was authorized by resolution duly add authorized by the board, or the corporation has been n	pted by its board of directo otified in writing of the chang	rs or by an officer so
A. A. William	by S. Simons as attorney-in-fac	nt
(Manature of an officer or director)	(Printed or Typed na	
I hereby accept the appointment as registered agent a	nd agree to act in this capaci	ty.
I further agree to comply with the provisions of a performance of my duties, and I am familiar with and	all statutes relative to the paccent the obligation of my n	roper and complete position as registered
agent. Or, if this document is being filed merely to hereby confirm that the forporation has been notified	reflect a change in the registe	red office address, I
SUMUNUM AUMUN?	January 23	, 2008
(Signature of Registered Agent)	(Date	2)
If signing on behalf of an entity:		
Samantha Simons, Assistant Secretary (Typed or Frinted Name)		
Make checks payable to Mail to: Division of Corporation	FLORIDA DEPARTMENT OF S s, P.O. BOX 6327, TALLAHAS	
Corporate Creations International Inc.		ののの
11380 Prosperity Farms Road #221E		56 2 M
PRIM RESCO (4910000 HI 33/11)		