

04/13/2006 16:06

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CT CORPORATION SYSTM

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F01000002158

Florida Department of State
Division of Corporations
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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REGISTERED AGENT CHANGE

BURRIS LOGISTICS, INC.

Certificate of Status	0
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G. Ocullette APR 14 2006

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, 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.

1. The name of the corporation: Burris Logistics
2. The principal office address: 501 Southeast 5th Street, Milford, DE 19963
3. The mailing address (if different): 501 Southeast 5th Street, Milford, DE 19963
4. Date of incorporation/qualification: 04/23/01 Document number: F01000002158
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CT Corporation System (Resigned)

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

Plantation, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

CT Corporation System

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

(P.O. Box NOT acceptable)

Plantation, Florida 33324

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, or the corporation has been notified in writing of the change.

By: Raymond J. Woolston

CT Corporation System

(Signature of an officer or director)

Raymond J. Woolston CFO

(Printed or typed name and title)

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Connie Bryan

CONNIE BRYAN

SPECIAL ASSISTANT SECRETARY

(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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