ACCOUNT NO.

072100000032

REFERENCE

761739

4385593

AUTHORIZATION

COST LIMIT

ORDER DATE: September 26, 2002

ORDER TIME : 10:43 AM

ORDER NO. : 761739-195

CUSTOMER NO: 4385593

500008178875--9

CUSTOMER: Ms. Leonor De La Torre

Aon Corporation

Aon Center

200 East Randolph Drive

Chicago, IL 60601

CHANGE OF AGENT

NAME:

PROUDFOOT REPORTS INCORPORATED

HOLLYWO-PHED LA HOISIAID

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd

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

	the provisions of sections 607.0502, 617.0502, ned corporation organized under the laws of the	•
submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.		
1. The name	of the corporation : PROUDFOOT REPORTS INCOR	PORATED
2. The mailin	ng address of the corporation: 1300 Walt Whitm	nan Rd., Melville, NY 11747
3. Date of in	corporation/qualification: 09/19/2001	_ Document number: F01000004933
4. The name	and address of the current registered agent and o	<u> </u>
	Registered Agents Legal Services, Inc.	AHAS
	1333 North Duval Street	ASSEE ASSEE
	Tallahassee, FL 32302	
5. The name	and address of the new registered agent (if chang (P. O. Box Not Accepta	ged) and/or registered office (if thinged):
	Corporation Service Company	
	1201 Hays Street	
	Tallahassee, Florida 32301	<u></u>
The street ad agent, as cha-	dress of its registered office and the street addrenged, will be identical.	ess of the business office of its registered
Such change authorized by	was authorized by resolution duly adopted by it the board.	ts board of directors or by an officer so
(Signate	ure of an officer, chairman or vice chairman of the board)	09/20/2002
Oignace	me of an officer, charman of vice charman of the boardy	(Date)
nne Martin,	Attorney-in-Fact	
Having been corporation, I further agre performance registered ag	(Printed or typed name and title) named as registered agent and to accept service I hereby accept the appointment as registered agent to comply with the provisions of all statutes referred of my duties, and I am familiar with and accepted.	ce of process for the above stated agent and agree to act in this capacity. relative to the proper and complete t the obligation of my position as
	J. J. Museum	00 100 15555
	(Signature of Registered Agent)	09/20/2002 (Date)
If signing on be	chalf of an entity:	
Louis J. Gia	accardo	Asst. Vice President
	(Typed or Printed Name)	(Capacity)

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