F01000006172

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5/1/03

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Wolf Tree Experts, Inc. (Name of corporation)	
DOCUMENT NUMBER: F01000006172	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing	g,
Please return all correspondence concerning this matter to the following:	
Tom Wolf	
(Name of person)	. 03
Wolf Tree Experts, Inc.	A A
(Name of firm/company)	N-I P
P.O. Box 5416	03 MAY -1 PH 4: 00
(Address)	
Knoxville, TN 37928-0416	
(City/state and zip code)	
For further information concerning this matter, please call:	
Jamie Spivey at (865) 687-3400 (Name of person) (Area code & daytime telephone number)	
Enclosed is a \$35.00 check made payable to the Department of State.	
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 32314 Tallahassee, FL 32309	

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

	e provisions of sections 607.0502, of change is submitted for a corpora in order to change its regis		ne State of	
of Florida. 1. The name of	the corporation: Wolf Tree Experts			
2. The principa Knoxville, T	il office address: <u>3310 Greenway Ro</u> N 37918	d		
	address (if different): P.O. Box 541 Tn 37928-0416	6		
4. Date of inco	rporation/qualification:August 24	1, 1962 Document number:	610000011.	
	nd street address of the current regist artment of State: Jim McInnis	tered agent and registered office on	file with the	
	2669 Cherokee Court		_	
	West Palm Beach, FL 33406			
6. The name and street address of the new registered agent (if changed) and /or registered office (changed): Ron Stayton				
	1740 S. Gettysburg Drive			
	(P.O. Box or personal to	mailbox NOT acceptable)		
_	ress of its registered office and the ged will be identical.			
authorized by t	vas authorized by resolution duly active board, or the corporation has be	· · · · · · · · · · · · · · · · · · ·	e.	
(Signature of an office	er, chairman or vice chairman of the board)	Tom Wolf President (Printed or typed name and title)		
I further agree performance o registered agei	t the appointment as registered age to comply with the provisions of a fany duties, and I am familiar with nt. Or, if this document is being fil I hereby confirm that the corporat	ll statutes relative to the proper an and accept the obligation of my p ed merely to reflect a change in th	id complete osition as e registered	
1707	Signature of Registered Agent)	(Date)		
If signing on beha	ulf of an entity:		03 MAY	
((Typed or Printed Name) * * * FILING I MAKE CHECKS PAYABLE TO FLORIDA D	(Capacity) FEE: \$35.00 * * * DEPARTMENT OF STATE AND MAIL TO:	FILED MY-I PM MIASSEE, I	