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(Business Entity Name)

(Document Number)

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ACCOUNT FILING COVER SHEET

ACCOUNT NUMBER: FCA000000005

REFERENCE: 2039239-4  
(Sub Account)

DATE: 4/8

REQUESTOR NAME: Lexis Document Services

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TELEPHONE: (\_\_\_\_) (\_\_\_\_ - \_\_\_\_\_) ext (\_\_\_\_)

CONTACT NAME: \_\_\_\_\_

CORPORATION NAME: Symitar Systems, Inc.

DOCUMENT NUMBER: \_\_\_\_\_  
(if applicable)

AUTHORIZATION: Cynthia J. Woodyard

*Chg. R.A.  
35.00*

- CERTIFIED COPY (1-9)
- CERTIFICATE OF STATUS (1-9)
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- After 4:30
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**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~~ CA in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: SYMITAR SYSTEMS, INC.
- 2. The principal office address: 404 Camino Del Rio South, Ste 200  
San Diego, CA 65708
- 3. The mailing address (if different): PO Box 807  
Monett, MO 65708
- 4. Date of incorporation/qualification: 6/29/2001 Document number: FO 2000000037

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

C T Corporation System  
1200 South Pine Island Road  
Plantation, FL 33324

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

LexisNexis Document Solutions Inc.  
3953 W.W. Kelley Road  
(P.O. Box or personal mailbox NOT acceptable)  
Tallahassee, FL 32311

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.

Kevin D. Williams  
(Signature of an officer, chairman or vice chairman of the board)

KEVIN D. WILLIAMS TREASURER  
(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.*

Michelle Krofel  
(Signature of Registered Agent)

April 7, 2003  
(Date)

If signing on behalf of an entity:  
Michelle Krofel  
(Typed or Printed Name)

Asst. Secretary  
(Capacity)

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