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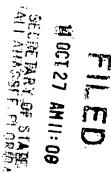
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RA (hang) 10-28-11

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Bekins A-1 Movers Inc. Name of Corporation
DOCUMENT NUMBER: F0 3 00000 10 53
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Beverly A. Jones Name of Contact Person
Rekins A-1 Malers Inc.
125 Stewart ROAD Address
Wilker Race Pa 18706 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:

Enclosed is a \$35.00 check made payable to the Department of State.

Name of Contact Person

Mailing Address:

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Area Code & Daytime Telephone Number

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 $\sqrt{\frac{1}{12}}$
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Bekins A-1 Movers, Inc.
2. The principal office address: 125 Strwart KOAD Wikes Barre PA 18706
3. The mailing address (if different):
4. Date of incorporation/qualification: 0/2/1997 Document number: 5(CIDNO 0491503
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Beverly A. Jones Assit
DEC West University Political
1135 WEST MICEISTING PARCOCAL
Dala sota PLA 34243 USA
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
CT Corp System
200 South Pine, Island Road
P.O. Box NOT acceptable
Plantation FL 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.
Signature of an officer or director Opinion A CARUSO CEO 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.
Darlare a Burke 10-19-11
Signature of Registered Agent Date
If signing on behalf of an entity: Barbara A. Burke
Special Assistant Secretary Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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