odumo it Number Only		
	1595	
C T CORPORATION SYSTI	⊡ M	
Requestor's Name 660 East Jefferson S	treet	
Address Tallahassee, Florida	32301	
City State Zip	Phone	2000021595127 -04/30/9701001020_
CORPORATIO	N(S) NAME	****280,00 *****35.00
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JAushell.	of Jackon He, Fl. I.	SECT ALL
		T T
()Profit ()NonProfit ()Limited Liability Company	() Amendment	() Merger
() Foreign	() Dissolution/Withdraw	al () Mark 65 9
() Limited Partnership () Reinstatement	() Annual Report () Reservation	() Other () Change of R.A. () Fictitious Name
() Limited Liability Partner () Certified Copy	() Photo Copies	() CUS
() Call When Ready	() Call if Problem	() After 4:30
(i) Walk In (i) Mail Out	() Will Wait	(b) Pick Up
Name Availability		PLEASE RETURN EXTRA COPY(S) FILE STAMPED
Updater Updater	4.35.37	
Acknowledgment Acknowledgment		50
W.P. Verlier		
CR2E031 (1-89)		

Florida Department of State, Jim Smith, Secretary of State

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

risids Otstage the undersigned COID	607.0502, 617.0502, 607.1508, or 617.1508, oration organized under the laws of the State of statement in order to change its registered office te of Florida.
1a. The name of the corporation is:	Marshalls of Jacksonville, FL., Inc.
1b. Date of incorporation1/13/81	Document number 514 975
2. The name and address of the curr	
United States Corporation	Company Sm 6
1201 Hays Street, Suite	105, Tallahassee, FL 32301
· · ·) RPORATION SYSTEM
c/o C T CORPORATION SYSTEM, 1200	South Pine Island Rd., Plantation, Florida 3332
of its registered agent as changed wi	lution duly adopted by its board of directors or by
PROCESS FOR THE ABOVE STATE IN THIS CERTIFICATE, I HEREBY A AGENT AND AGREE TO ACT IN TH WITH THE PROVISIONS OF ALL ST PLETE PERFORMANCE OF MY DU'THE OBLIGATION OF MY POSITION	SIGNATURE BY: Come Ry Special But Special But (Registered Agent) DATE April 11, 1997
Division of Corporations,	P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$35.00

CR2E045 (7-91) (FLA. - 2194 - 3/4/92)