# F93000003317

| (Requestor's Name)                      |                   |      |  |  |
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| (Ad                                     | dress)            |      |  |  |
|   |                   |      |  |  |
| (Ad                                     | dress)            |      |  |  |
|   |                   | •    |  |  |
| (City/State/Zip/Phone #)                |                   |      |  |  |
| ·                                       | •                 | ·    |  |  |
| PICK-UP                                 | WAIT              | MAIL |  |  |
|   |                   |      |  |  |
| Bu                                      | siness Entity Nan | ne)  |  |  |
| (DW                                     | omess Emay Man    | ,    |  |  |
| (Do                                     | cument Number)    |      |  |  |
| (DC                                     | cument number)    |      |  |  |
|   | - ···             |      |  |  |
| Certified Copies Certificates of Status |                   |      |  |  |
|   |                   |      |  |  |
| Special Instructions to Filing Officer: |                   |      |  |  |
|   |                   |      |  |  |
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Office Use Only



100041760031

10/13/04--01017--019 \*\*35.00



of 15 of feet



### **FILING REQUEST**

October 8, 2004

#### **FLORIDA SECRETARY OF STATE**

Type of Filing:

CHANGE OF AGENT

Subject(s):

VOORHEES INTERNATIONAL, INC.

Form(s) Enclosed:

STATEMENT OF CHANGE OF REGISTERED AGENT

Supporting Document(s):

NONE

Check Enclosed:

CHECK #16983 FOR \$35.00

Return Via:

**REGULAR MAIL** 

Filing Method:

**ASAP** 

PLEASE RETURN TO:

PREMIER CORPORATE SERVICES, INC.

590 PARK STREET, SUITE 6

ST. PAUL, MN 55103

Please call me at 1-800-227-1256 if there are any questions.

Thank you!

Sue Brodtmann

# FILED

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

| change is submitt  | rovisions of sections 607.0502, 617.0502, 607<br>ed for a corporation organtzed under the law<br>stered office or registered agent, or both, in th   | s of the State of Missoui   |   |
|--|--|---|---|
| -  | e corporation: Voorhees International, Inc.  |   |   |
|  | ffice address: 1656 Headland Drive, Fento  |   |   |
| z. The principal c   | The address.   |   |   |
| 3. The mailing ac  | dress (if different):  |   |   |
| 4. Date of incorp  | oration/qualification: 07/20/1993  | Document number: F93000003317   |   |
| 5. The name and Florida Depart   | street address of the current registered agent a ment of State:  | and registered office on file with the  |   |
|  | CT Corporation System  |   | A≥ 0  |
|  | 1200 South Pine Island Road  |   |   |
|  | Plantation, FL 33324   |   | 04 OC) 13<br>ECRETARY<br>ALI AHASS                  |
| 6. The name and (if changed):  | street address of the new registered agent (if c   | changed) and /or registered office  | JC) 13 PM 3: 5<br>RETARY OF STAT<br>AHASSEE, FLORI  |
|  | NRAI Services, Inc.  |   | ADA<br>AEA  |
|  | 526 E. Park Avenue   | NOT   |   |
|  | (P.O. Box or personal mailbox Tallahassee, FL 32301  | (NOT acceptable)  |   |
| The street addre changed will be   | ss of its registered office and the street addressed.  | ess of the business office of its register  | ed agent, as  |
| Such change wa   | s authorized by resolution duly adopted by i<br>corporation has been notified in writing of  | ts board of directors or by an officer sthe change.   | o authorized by                                     |
|  | gnature of an officer or director)   | Stephen G. Voohees (Printed or typed name and tit   |   |
| I hereby accept<br>I further agree t<br>duties, and I am<br>being filed mere<br>been notified in | the appointment as registered agent and aging to comply with the provisions of all statutes in familiar with and accept the obligation of not to reflect a change in the registered office writing of this change. | ree to act in this capacity,<br>relative to the proper and complete per<br>ny position as registered agent. Or, if<br>address, I hereby confirm that the co | formance of my<br>this document is<br>rporation has |
| NRAI Services,   | Inc.  U Mouman  Signature of Registered Agent)   | 10-8-0V<br>(Date)   |   |
| If signing on be   | nalf of an entity:   |   |   |
| Sue Brodtman   |  | Asst. Secretary   |   |
|  | (Typed or Printed Name)  | (Capacity)  |   |

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