Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850) 6

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Account Name : CORPDIRECT AGENTS, INC.

Account Number: 110450000714

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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REGISTERED AGENT CHANGE CONTINENTAL FIELD SYSTEMS, INC.

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Electronic Filing Menu

Corporate Filing Menu

Help

To: FL Dept of State Subject: 010001.121098

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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 Georgia in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: CONTINENTAL FIELD SYSTEMS, INC.					
23 Westgate	Boulevard	Savannah	GA_	31405	
3. The mailing address (if diffe	reni):				
4. Data of incorporation/qualif	ication: 2/23/1994	Document number	r: F9400	0000903	
5. The name and street address Florida Department of State		ent and registered offic	ce on file with the		
	CT Corpora	ation System		_	
1200 S. Pine Island Road					
	Plantation	FL.	33324		
6. The name and street address (if changed):	of the new registered agent	(if changed) and for r	egistered office		
National Corporate Research, Ltd., Inc.					
515 East Park Avenue					
(P.O. Dox NOT scoopable)					
	Tallahasses	Florida	32301		
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.					
Kay 19772	trun		McElveen	Secretary	
(Signature clan off I hereby accept the appointm I further agree to camply will of my duites, and I am famili document is being filed mere corporation has been notified	eu a diama) pni as registered agent and the provisions of all stat pr with and accept the obji by to reflect a change in the parting of this change.	i agree to act in this des relative to the pro gation of my position registered office ad	Primed or typed mane an capacity, oper and complete as registered ages dress, I hereby con	performance it. Or, if this firm that the	
(Séculiare of Post	Cirld Olf	-	O[8]	<i>0010</i>	
If signing on behalf of an en	ity: SOCY And	55011d	al		

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

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