FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

1996		Secretary of State DIVISION OF CORPORATIONS					
DOCUMENT # F9400006387 (4) 1. Corporation Name							
SOUTHERN CONSC	DLIDATED SERVICES	i, INC.					
Principal Place of Business	Mailu	ng Address					
330 SHIPYARD BLVD. WILMINGTON NC 28412		330 SHIPYARD BLVD. WILMINGTON NC 28412					
2. Principa' Place of Business	2a . N	⁄Iailing Address					
21	26						



Survey Apr. 1, etc.	330 SHIPYARD BLVD. 330 SHIPY. WILMINGTON NC 28412 WILMINGTO						3. Date Incorporated or Qualified 12/14/1994	3a. Date	of Last F I4/12/1 !		
Supply April 2, etc.	2. Principa' Plac	ce of Business	2a. Mailing Address				4. FEI Number	<u> </u>		Applied For	
22							56-1874513			Not Applicable	
City & State City & City & State City & City & State City & State City & State City & State City	Suite, Apt. #, etc. Suite, Apt. #, etc						5. Certificate of Status Desired		\$8.75 Additional Fee Required		
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of	City & State City & State						, ,	11 '			
BI Name	Zip 24	Zip Country Zip Country					Florida Statutes Yes 🖪 No				
DAMASIO, ANGELA C 1703 NORTHWEST 79TH AVENUE MAMI FL 33128 82 Street Address IP.O. Box Number is Not Acceptable) 83 Cby FL 85 ZP Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Fixeds Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in this State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familier with and accept the obligations of, Sections 607,0505, Tonda Statutes. SIGNATURE Signate Agents and society the obligations of, Sections 607,0505, Tonda Statutes. SIGNATURE Signate Agents and society intending in the obligations of, Section 607,0505, Tonda Statutes. SIGNATURE Signate Agents and society intending in the obligations of, Section 607,0505, Tonda Statutes. SIGNATURE Signate Agents and Statutes are also provided in the composition of board of directors. I hereby accept the appointment as registered agent, I am familier with a statute and statutes. SIGNATURE Signate Agents and Statutes are also provided agent, I am familier and statutes. SIGNATURE Signate Agents and Statutes are also provided agent, I am familier and statutes. SIGNATURE PD		9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New R	egistered /	igent		
1703 NORTH-WEST 79TH AVENUE 883				-	B1 1	Name					
MIAMI FL 33126					B2 S	Street Add	ress (P.Ö. Box Number is Not Acceptate	ile)			
The Presign to the provisions of Sections 607 0502 and 607 1508, Florida Statutos, the above named corporation submits this statement for the outgood of control florida Statutos. The registered agent for both, in the State of Florida Statutos and corporation submits this statement for the outgood of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutos. SIGNATURE System Replace operator of registerial agents and the provision of the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutos. SIGNATURE 12. OFFICES AND DIRECTORS 13. ADDITIONS/G-HANGES TO OFFICERS AND DIRECTORS IN 12 14. The PD					B3						
or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Fan familiar with, and accept the obligations of, Section 607, Se					B4 (City		FL	85 Z	ip Code	
NAME	12.	OFFICERS AN	ND DIRECTORS	13.		ignature requir		ICERS AND			
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _

Shut H Huther Signing Officer on Director Dutchens CEO & VP

3-15-96

910-392-8210

Daytime Phone #