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|           | Windon, U            |      |

City/State/Zip

Phone #

Office Use Only

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

| 1.                   | (Corporation Name)     | (Document #)                                  |                  |           |
|----------------------|------------------------|---|------------------|-----------|
| 2                    | (Corporation Name)     | (Document #)                                  | <del>- 1</del> 9 | :3<br>: a |
| 3.                   | (Corporation Name)     | (Document #)                                  |                  | :<br>3    |
| 4                    | (Corporation Name)     | (Document #)                                  |                  |           |
| □ Walk in □ Mail out | Pick up time Will wait | Certified Copy  Photocopy  Certificate of Sta | tric             |           |

| NEW FILINGS |                   |  |  |
|-------------|-------------------|--|--|
|             | Profit            |  |  |
|             | NenProfit         |  |  |
|             | Limited Liability |  |  |
|             | Domestication     |  |  |
|             | Other             |  |  |

| AMENDMENTS                             |
|--|
| Amendment                              |
| Resignation of R.A., Officer/ Director |
| Change of Registered Agent             |
| Dissolution/Withdrawal                 |
| Метдет                                 |

800002226068--3 -06/30/97--01044--004 \*\*\*\*\*35.00 \*\*\*\*\*35.00

## Annual Report Fictitious Name NameReservation

| REGISTRATION/<br>QUALIFICATION/ |   |
|---------------------------------|---|
| Foreign                         | _ |
| Limited Partnership             | _ |
| Reinstatement                   |   |
| Trademark                       |   |
| <br>Other                       |   |

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CENTRED !

Examiner's Initials

**FILING FEE: \$35.00** 

## 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, the undersigned corporation organized under the laws of the State of <a href="Virginia">Virginia</a> submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.  1. The name of the corporation is: <a href="RER New Resources">RER New Resources</a> . Inc. |   |   |   |
|---|---|---|---|
| 2. The mailing ad   | dress of the corporation is: 950  | Herndon Parkway, Suite  | 200, Herndon, VA 22070                                |
| <ul><li>3. Date of incorp.</li><li>4. The name and</li></ul>  | oration/qualification: <u>@ - ə ə - ٩ 5</u><br>address of the current registered age  | Document number nt and office:  | er: B95000000883                                      |
| _   | CT Corporation System   |   |   |
|   | 1200 South Pine Island H  | Road  |   |
|   | Plantation, Florida 333   | 324   | <u> </u>  |
| 5. The name and   | address of the new registered agent   | and office: (P.O. Box Not A   | cceptable)  |
|   | Richard Hollowell   | `   |   |
| -   | 927 Clint Moore Road  | <del></del>   |   |
| -   | Boca Raton, Florida 334   | 487   |   |
| The street address agent, as change   | ss of its registered office and the street, will be identical.  | et address of the business off  | fice of its registered                                |
| Boul  | s authorized by resolution duly adopte board.   | 3/197   | or by an officer so                                   |
|   | cer, chairman or vice chairman of the board)  | (Date)  |   |
| Rich  | ard K. Hollowell  |   |   |
| Having heen no  | •   | ed name and title)  | shove stated cornoration                              |
| I hereby accept accept to comply with the and I am familia  | med as registered agent and to accep<br>the appointment as registered agent<br>provisions of all statutes relative to t<br>ir with and accept the obligation of n | and agree to act in this cape<br>the proper and complete per<br>ny position as registered agi | icity. I further agree to formance of my duties, ent. |
| Signature   | DANGE OF REgistered Agent)  | 37/97<br>(Date)   | ·   |
| If signing on be  | half of an entity:  |   |   |
|   | Nd K. Hollowell Printed Name)   | President &   | <u>C00</u>  |