Document Number Only 000002790 CT CORPORATION SYSTEM 660 EAST JEFFERSON STREET Requestor's Name 32301 TALLAHASSEE, FL Address 222-1092 800002484998--017 -04/10/98--01056--007 Phone Zip State City *****35.00 *****35.00 CORPORATION(S) NAME 湿 () Profit () Merge函 () Amendment () NonProfit) Limited Liability Co. () Mark () Dissolution/Withdrawal () Foreign () Other () Annual Report () Limited Partnership Change of R.A. () Reservation () Reinstatement Fictitious Name Filing () CUS () Photo Copies () Certified Copy () After 4:30 () Call if Problem () Call When Ready Pick Up () Will Wait Walk In () Mail Out Name 4/10 Availability Document Examiner Updater 4/10 Verifier Acknowledgment W.P. Verifier

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

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 Illinois submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation i	s Outsourcing	Service Comp	any of Ameri	ca, Inc.
1b. Date of incorporation Jun-	e 4,1996	Documen	t number	\$008002790
2. The name and address of the	current register	ed agent and o	ffice: AHA	APR -
Gayle G. Edwards, · 7022 A	.C. Skinner Par nville, Fla. 32	rkway, Ste. 20 2256	*	
3. The name and address of the r (P.O. Box Not Accept	new registered ag able) CORPORATION SY		¥.	PATE 2
c/o C T CORPORATION SYSTEM,	1200 South Pine	Island Rd.,	Plantation,	Florida 33324
Such change was authorized by rean officer so authorized by the box history SIGNATURE	arq. 	opted by its bo aren L. Fisher ed or printed na	r, Vice Pres	ident
DATE				
HAVING BEEN NAMED AS REGIS PROCESS FOR THE ABOVE STATING IN THIS CERTIFICATE, I HEREBY AGENT AND AGREE TO ACT IN T WITH THE PROVISIONS OF ALL S PLETE PERFORMANCE OF MY D THE OBLIGATION OF MY POSITION	TED CORPORAT ACCEPT THE A THIS CAPACITY. STATUTES RELA UTIES, AND I AN	ION AT THE PIPPOINTMENT I FURTHER ACTIVE TO THE PIPPOINTMENT I FAMILIAR WITH	LACE DESIGI AS REGISTE GREE TO CO	NATED RED MPLY
	SIGNATURE	c I Go	RPORATION SY	
				" -
			red Agent)	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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

FILING FEE: \$35.00