## 5000005285

CT CORPORATION SYSTEM

1025 Vermont Avenue, NW Washington, DC 20005 Tel. 202 393 1747 Fax 202 393 1760

January 30, 1998

Florida Department of State **Division of Corporations** P.O. Box 6327 Tallahasse, FL 32314

Re:

Office Furniture Network, Inc.

Order #: 989672

000002418200--8 \*\*\*\*\*35.00 \*\*\*\*\*35.00

Dear Sir or Madam:

Enclosed for filing is a Statement of Change of Registered Office or Resident Agent or Both together with funds in payment of the required fees on behalf of this corporation. This document should be filed upon receipt.

Evidence of this filing should be returned to this office.

If you have any questions or if for any reason the filing cannot be effected promptly, please notify this office of the details by calling our toll-free number: 1-800-336-3376.

Very truly yours,

Craig Hundley

Associate Customer Specialist

Team One Ext. 3022

4 1998

RA Chg.

## 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 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 is: Office Furniture Network, Inc.
Albar, S
1b. Date of incorporation October 11, 1996 Document number 19600005
2. The name and address of the current registered agent and office:
Corporation Service Company
1201 Hays Street, Tallahassee, FL 32301
3. The name and address of the new registered agent and office:  (P.O. Box Not Acceptable)  C T CORPORATION SYSTEM
c/o C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation Florida 333
The street address of its registered agent 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.  Mark D. Director / Assistant Secretary
SIGNATURE (Type or printed name and title)
DATE
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.
C T CORPORATION SYSTEM
SIGNATURE BY:
DATE January 30, 1998
Division of Corporations P.O. Boy 6327 Tallahassee El 32344

Filing Fee: \$35.00

(FLA. - 2194 - 3/4/92)

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