## 96000005747

## Florida Department of State

Division of Corporations Public Access System

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: ROGERS, TOWERS, BAILEY, ET AL

Account Number : 076666002273

Phone

: (904)398-3911

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## REGISTERED AGENT CHANGE

**DUNHILL TEMPORARY SYSTEMS, INC.** 

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O. Coullierte MAR 0 5 2008

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502 statement of change is submitted for a corporation organi in order to change its registered office or registe	zed under the laws of the State of NY	
The name of the corporation: Dunhill Temporary Sy		-
2. The principal office address: 9190 Priority Way Wa		
3. The mailing address (if different):		
4. Date of incorporation/qualification: 11/5/96	Document number: F96000005747	
5. The name and street address of the current registered ag Florida Department of State:	gent and registered office on file with the	
Corporation Services Compa	any	
1201 Hays Street		80
Tallahassee, FL 32301	<del>.</del>	3 MAK
6. The name and street address of the new registered agent (if changed):	t (if changed) and /or registered office	ţ
Marc M. Mayo		AH Y
1301 Riverplace Boulevard	, Suite 1500	7
Jacksonville, FL 32207		-
The street address of its registered office and the street as changed will be identical.	address of the business office of its registered agent,	
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been not	by its board of directors or by an officer so iffed in writing of the change.	
(Name the of an officer or director)	Doug Anderson, President (Printed or typed name and title)	
thereby accept the appointment as registered agent and further agree to comply with the provisions of all status of my duties, and I am familiar with and accept the obligations of the collision of the collision of the contract of the collision of the corporation has been notified in writing of this change.	l agree to act in this capacity. tes relative to the proper and complete performance zation of my posttion as registered agent. Or, if this registered office address, I hereby confirm that the	
(Signature of Registerey Agent)	March 4 , 2008	
if signing on behalf of an entity:	\ <b>,</b>	
(Typed or Printed Name)		
* * * FILING RE)	R: \$35,00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)