76000006003



ACCOUNT NO.

072100000032

REFERENCE

842954

7186378

AUTHORIZATION

\$ 35.00

ORDER DATE :

September 26, 2000

ORDER TIME :

12:44 PM

ORDER NO. : 842954-045

CUSTOMER NO:

7186378

CUSTOMER:

Ms. Suzanne M. Thill

Teligent Services, Inc.

8065 Leesburg Pike

Suite 400

Vienna, VA 22182

200003408272

CHANGE OF AGENT

NAME:

AMERICAN LONG LINES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CONTACT PERSON: Tamara Odom

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

Pursuant to th	he provisions of sections 607.0502, 617.0502,	607.1508, or 617.1508, Florida Statutes,
the undersigne	ed corporation organized under the laws of the S	State of Pennsylvania
submits the fo	llowing statement in order to change its regist	ered office or registered agent, or both, in
the State of Flo	orida.	
	of the corporation is:	
AMERICAN	LONG LINES, INC.	
2. The mailing	g address of the corporation is: 8065 L	eesburg Pike Suite 400,
	a VA 22182	
	orporation/qualification: November 18, 1996	Document number: F96000006003
4. The name a	and address of the current registered agent and o	ffice:
	Edwin F. Blanton	SEC SALLE
	825 Thomasville Rd.	
	Tallahassee, FL 32302	
5. The name a	and address of the new registered agent and office	ce: (P. O. Box Not Acceptable)
	Corporation Service Company	
	1201 Hays Street	
	Tallahassee, FL 32301	And the second s
The street add agent, as chang	lress of its registered office and the street addriged, will be identical.	ress of the business office of its registered
Such change vauthorized by	was authorized by resolution duly adopted by ithe board.	its board of directors or by an officer so
	3 Here	9/13/00
Signatu Laurence E	are of an officer, chairman or vice chairman of the board) Harris, Senior Vice President	(Date)
	(Printed or typed name and title)	
corporation, I I further agree	amed as registered agent and to accept service hereby accept the appointment as registered ag to comply with the provisions of all statutes rel of my duties, and I am familiar with and accept t nt.	ent and agree to act in this capacity. ative to the proper and complete
Corporation :	Service Company	9/27/00
By: <i>O</i>	(Signature of Registered Agent)	(Date)
If signing on behal	If of an entity:	
Carol K. Dolo		Assistant Vice President
	(Typed or Printed Name)	(Capacity)
	* * * FILING FEE: \$35	7.00 * * *
CR2EO45(7/97)	_	

P. O. Box 6327

TALLAHASSEE, FL 32314

DIVISION OF CORPORATIONS