

F97000005174



Chromatix

19451 Twin Rivers Rd., Suite 265
Columbia, Md. 21044

City/State/Zip

Phone #

900002655448--4
-10/05/98-01085-003
*****35.00 *****35.00

Office Use Only

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

1. _____ (Corporation Name) (Document #)
2. _____ (Corporation Name) (Document #)
3. _____ (Corporation Name) (Document #)
4. _____ (Corporation Name) (Document #)

- Walk in
 Pick up time _____
 Certified Copy
 Mail out
 Will wait
 Photocopy
 Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input checked="" type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
 98 OCT -5 PM 4:23
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

10-7-98

Examiner's Initials	CC
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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 Maryland 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: Chromatix, Incorporated

2. The mailing address of the corporation is: 10451 Twin Rivers Road, Suite 265, Columbia, Maryland 21044

3. Date of incorporation/qualification: June 17, 1988 Document number: F97000005174

4. The name and address of the current registered agent and office:
Thomas H. Lawson
1780 Painted Bunting Circle
Palm Harbor, Florida 34683

5. The name and address of the new registered agent and office. (P. O. Box Not Acceptable)
David Roy Goyette
8664 Ethans Glen Terrace
Jacksonville, Florida 32256

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TALLAHASSEE, FLORIDA

The street address of its registered office 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.

Thomas Lawson
(Signature of an officer, chairman or vice chairman of the board)

29 Sep. 98
(Date)

Thomas Lawson President
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:
James M. Feilinger
(Typed or Printed Name)

Business Manager 9-30-98
(Capacity)

*** FILING FEE: \$35.00 ***