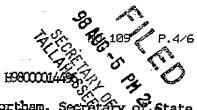
XL CORP & RESEARCH AUG. 5.1998 10:20 AM NO.109 P.3/6 8/05/98 ORATIONS 11:09 AM COVER SHEET (((H98000014496 7))) TO: DIVISION OF CORPORATIONS FAX #: (850) 922-4000 FROM: BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC. ACCT#: 075350000353 CONTACT: CATHY LEACH PHONE: (212)431~5000 FAX #: (212)431-5111NAME: PROFESSIONAL PLANNING & TECHNOLOGIES, INC. AUDIT NUMBER...... H98000014496 DOC TYPE......REGISTERED AGENT CHANGE CERT. OF STATUS...O PAGES..... CERT. COPIES.....0 DEL.METHOD.. EST.CHARGE.. \$35.00 NOTE: PLEASE PRINT THIS PAGE AND USE IT AS A COVER SHEET. TYPE THE FAX AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT ** ENTER 'M' FOR MENU. ** ENTER SELECTION AND <CR>: .

98 AUG -5 AM 11: 42

RA-Cham 016/98



Florida Department of State, Sandra B. Mortham, 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 Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

la. The name of the corporation is: PROFESSIONA	L PLANNING & TECHNOLOGIES, INC.
•	
1b. Date of incorporation	Document number H83069
2. The name and address of the current registe XL CORPORATE SERVICES, INC., 216 West Col	
•	
3. The name and address of the new registered a (P.O. Box Not Acceptable) XL CORPORATE SERVICES, INC., 4435 01d Wint	
The street address of its registered agent and the of its registered agent as changed will be identicated.	e street address of the business office al,
Such change was authorized by resolution duly an officer so authorized by the board. SIGNATURE 7/30/98 DATE	HARODTUNIAN PRES.
•	

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.

BlumbergExcelsion 62 White St NY, NY 10013 212-431-5000

SIGNATURE (Registered Agent) For XL Comporate Sucs

H98000014496

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

CR2E045 (7-91)

FILING FEE: \$35.00