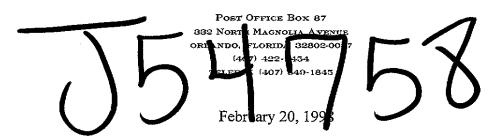
DRAGE, DE BEAUBIEN, KNIGHT, SIMMONS, ROMANO & NEAL

Attorneys and Counsellors at Law A Partnership Including Professional Associations



Department of State P.O. Box 6327 Tallahassee, FL 32314 300002437503--S -02/23/98--01049--006 *****35.00 *****35.00

RE: Accent Exterminating, Inc.

Dear Sir/Madam:

Enclosed please find the Statement of Change for Registered Agent and a check for \$35.00 to cover the filing fees.

If you have any questions, please do not hesitate to contact our office.

Sincerely,

Frank M. Fernández

FMF/lir Enclosure

cc: Don Whitaker

2721 Forsyth Rd.

Winter Park, FL 32792

Mister 3st

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

	provisions of sections 607.0502, 617.0502, 607.1508, poration organized under the laws of the State of $_$ $_$ $_$	
submits the foll State of Florida	owing statement in order to change its registered office 1.	e or registered agent, or both, in the
1. The name of	the corporation is: ACCENT EXTERMINATING,	INC.
2. The mailing	address of the corporation is: 2721 Forsyth Rd.	, Ste. 105
	Winter Park, FL	32792-8207
3. Date of inco	propration/qualification: January 30, 198 Docu	ment number: J54758
4. The name an	nd address of the current registered agent and office:	
	ALAN G. GRANT, JR.	
	13 South Magnolia Avenue	98 FEB
5. The name ar	Orlando, FL 32801 and address of the new registered agent and office: (P. O	
	332 North Magnolia Avenue	
	Orlando, FL 32801	
The street add	ress of its registered office and the street address of ged, will be identical.	the business office of its registered
Such change authorized by	was authorized by resolution duly adopted by its boat the board. The of an officer, chairman or vice chairman of the board)	and of directors or by an officer so $\frac{2-17-98}{\text{(Date)}}$
	(Printed or typed name and title)	2-17-98 (Date)
Having been a corporation, I further agre performance registered again.	named as registered agent and to accept service of part the appointment as registered agent to comply with the provisions of all statutes relative of my duties, and I am familiar with and accept the cent.	process for the above stated - and agree to act in this capacity. We to the proper and complete pobligation of my position as
_\	(Signature of Registered Agent)	2-17-98 (Date)
If signing on be	half of an entity:	
	(Typed or Printed Name)	(Capacity)