75535



ACCOUNT NO. : 072100000032

REFERENCE

278870

7182077

AUTHORIZATION

COST LIMIT

ORDER DATE : June 17, 1999

ORDER TIME :

9:34 AM

ORDER NO. : 278870

CUSTOMER NO: 7182077

CUSTOMER: Ms. Rebecca Ringleb

Comcar Industries, Inc. 502 East Bridgers Avenue

Auburndale, FL 33823

800002925138

CHANGE OF AGENT

NAME: MD TRANSPORT SYSTEMS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Sara Lea

C. COULLIETTE JUL 0 7 1999

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

Pursuant to the provisions of sections 607.0502, 617.0502, he undersigned corporation organized under the laws of the S	
ne undersigned corporation organized under the turns of the E submits the following statement in order to change its regist the State of Florida.	
1. The name of the corporation is: MD TRANSPORT SYSTEMS,	INC.
2. The mailing address of the corporation is:P. O. Draw	er 67
Auburndale	, FL 33823
3. Date of incorporation/qualification: May 29, 1987	Document number: 05291987
4. The name and address of the current registered agent and o	office:
MILTON E. JACOBS	
502 E. BRIDGERS AVENUE	SSE - E
AUBURNDALE, FL 33823	
5. The name and address of the new registered agent and offi	ce: (P. O. Box Not Acceptable
Corporation Service Company	
1201 Hays Street	
Tallahassee, FL 32301	
The street address of its registered office and the street add agent, as changed, will be identical.	
Such change was authorized by resolution duly adopted by authorized by the Board.	its board of directors or by an officer so
1/Sa Rhe	<u>le/1/99</u>
(Signature of an officer, chairman or vice chairman of the board)	(Date)
BILLY R. READY, Secretary	
(Printed or typed name and title) Having been named as registered agent and to accept service corporation, I hereby accept the appointment as registered a I further agree to comply with the provisions of all statutes reperformance of my duties, and I am familiar with and accept registered agent.	gent and agree to act in this cupacity. Plative to the proper and complete
Corporation Service Company By: Aug R. Durch	7-7-99 (Date)
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
LAURA R. DUNLAP (Typed or Printed Name)	Assistant Vice President (Capacity)
* * * DIT INC DDF • \$25 AA * *	

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