Document Number Only C T Corporation System Requestor's Name 660 East Jefferson Street Address (850) 222-1092 Tallahassee, FL 32301 800002905258--8 -06/15/99--01065--015 Phone Zip State City *****35.00 *****35.00 CORPORATION(S) NAME Industries () Profit () Amendment () NonProfit () Limited Liability Company () Dissolution/Withdrawal () Foreign () O(Feit. () Annual Report () Limited Partnership (A) C醫劑e of R.A. () Reservation () Reinstatement) Fictisous Name () CUS / G/S () Photo Copies () Certified Copy () After 4:30 () Call if Problem () Call When Ready Pick Up () Will Wait Walk In () Mail Out Name PLEASE RETURN EXTRA COPY(S) Availability FILE STAMPED Document Examiner OLYSTON DEPARTMENT OF STATE ORIGINAL AUTOMOTOR TO THE PROPERTY OF CONTRACT ORIGINAL AUTOMOTOR SEET, FLORIDAL Updater THANK YOU! MANDI KENT Verifler SS: IIWY SINOT 66

RECEIVED

Acknowledgment

W.P. Verifier

Florida Department of State, Jim Smith, Secretary of State

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

| Pursuant to the provisions of sections 607.0 Florida Statutes, the undersigned corporation submits the following state or registered agent, or both, in the State of | on organized under the laws ment in order to change its | of the State of |
|--|---|--|
| 1a. The name of the corporation is: JDK In | dustries, Inc. | - |
| | | |
| 1b. Date of incorporation October 13, 198 | 8 Document numb | per_K38552 |
| 2. The name and address of the current re | gistered agent and office: | 7 S.F. |
| 6515 Southern Blvd., West Palm Beach, | FL 33413 | AH. |
| 3. The name and address of the new regis (P.O. Box Not Acceptable) | tered agent and office: | FILED W 15 PM / SSEE, FLOOR |
| c/o C T CORPORATION SYSTEM, 1200 South | Pine Island Rd., Planta | tion Florida 33324 |
| The street address of its registered agent a of its registered agent as changed will be id Such change was authorized by resolution | lentical. | |
| an officer so authorized by the board. | MACANIELL | WICE PRESIPENT |
| macmacanell 6/8/19 SIGNATURE | (Type or printed name | VICE PRESIPENT and title) |
| | | |
| HAVING BEEN NAMED AS REGISTERED A PROCESS FOR THE ABOVE STATED CO IN THIS CERTIFICATE, I HEREBY ACCEP AGENT AND AGREE TO ACT IN THIS CAP WITH THE PROVISIONS OF ALL STATUTI PLETE PERFORMANCE OF MY DUTIES, A THE OBLIGATION OF MY POSITION AS R SIGNATUR Jennifer McBurnett, Assis | RPORATION AT THE PLAC T THE APPOINTMENT AS I PACITY. I FURTHER AGRE ES RELATIVE TO THE PRO AND I AM FAMILIAR WITH A | CE DESIGNATED REGISTERED EE TO COMPLY DPER AND COM- AND ACCEPT |
| Division of Cornerations P.O. | | FI 32314 |

Filing Fee: \$35.00

(FLA. - 2194 - 3/4/92)

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