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DEVISION OF CORPORATIONS

[ALLAHASSEE, FLORIDA

J. BRYAN MAR 2 5 2003

CT CORPORATION

March 25, 2003

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399



Re: Order #: 5813534 SO

Customer Reference 1:

Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

North Star Technical Services, LLC (DE) Change of Agent Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Brigham Weir Fulfillment Specialist Brigham_Weir@cch-lis.com

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company 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 limite	d liability company	is: North Star Tech	nical Services, LLC	
2. The mailing address of	f the limited liability	y company is:	· · · · · · · · · · · · · · · · · · ·	
2000 International Park Drive	, Birmingham, Alabama	a 35242		
C/20/00		`	402000000259	
		102000000258		
3. Date of ming/registrat	ion in Fiorida	4.	Document numb	ber
5. The name of the register Florida Department of		egistered office add	dress as shown on	the records of the
	Corporation Service (_
		Name		
	1201 Hays Street			
		Address		
	Tallahassee, FL 3230	ity, State and Zip	· · · · · · · · · · · · · · · · · · ·	
		2		
6. The name and address	of the new registere	ed agent and/or offi	ce:	是 五
C T Corporation System		長月27日		
		Name		SSS
	1200 South Pine Island			所名主し
	Florida street add	lress (P.O. Box N O	OT acceptable)	FILED 2103 MAR 25 PM 2: 09 2103 MAR 25 PM 2: 09 2104 CF CORPORATION ALLAHASSEE, FLORIDA
	Plantation	FL 33324		50
	Cit	y, State and Zip		7.00
If the limited liability come confirmed that after the cland the business office of liability company, it is her the members of the limite the operating agreement of the limite that the limited has been supported by the limited that the limited has been supported by the limited has been supp	thange or changes are the registered agent reby confirmed that d liability company of the limited liability.	e made, the Floridat will be identical. the change(s) was, or as otherwise prey company.	a street address of	f the registered office f a Florida limited
(Printed or typed name of signee)		· · · · · · · · · · · · · · · · · · ·		-
I hereby accept the appoint comply with the provision and I am familiar with an Chapter 608, F.S. Or, if the address, I hereby confirm C T Corporation System	intment as registere is of all statutes rela d accept the obligat his document is bein that the limited liab JOAN BOLDEN	itive to the proper tions of my position ng filed to merely i	and complete per n as registered ag reflect a change i	formance of my duties, tent as provided for in In the registered office
(Signature of Registered Agent) Divisio	n of Corporations,		allahassoo FT	32314
27171910	~ or on hor amond	9 * **** **** **** ** **** *** **** **	. инаназусс, Р.С.	ノ州・大平

NHS18(10/99) FILING FEE: \$25.00