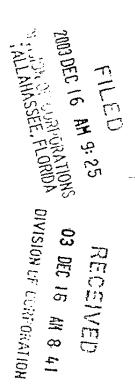
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ACCOUNT NO. : 072100000032

REFERENCE : 320409 4983A

AUTHORIZATION :

COST LIMIT :

ORDER DATE: November 13, 2003

ORDER TIME: 4:49 PM

ORDER NO. : 320409-115

CUSTOMER NO:

4983A

CUSTOMER: Ms. Marilyn Adelman

Cozen O'connor, P.c. 1900 Market Street

The Atrium

Philadelphia, PA 19103

CHANGE OF AGENT

NAME: SUNSTATES SECURITY, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY __ PLAIN STAMPED COPY

CONTACT PERSON: Ellyn Herndon

*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 limited liability company is: SUNSTATES SECURITY, LLC
2. The mailing address of the limited liability company is:
c/o Fred Setchell, 6950 Philips Highway, Suite 8, Jacksonville, FL 32216
06/24/2002 M02000001668
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
Donald Wilkening
Name
6060 Philips Wichest Cuito 9
Address S
Addices
Jacksonville, FL 32216 City, State and Zip
City, State and Zip
Address Jacksonville, FL 32216 City, State and Zip 6. The name and address of the new registered agent and/or office: Corporation Service Company Name 1201 Hays Street
Corporation Service Company
Name
1201 Hays Street
Florida street address (P.O. Box NOT acceptable)
riorida street address (1.0. Don 1101 deceptable)
Tallahassee FL 32301
City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.
(Signature of a member or authorized representative of a member)
Glen Burrell, Manager
(Printed or typed name of signee)
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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, Thereby confirm that the limited liability company has been notified in writing of this change.
(Signature of Registered Agent) Dorothy Tenshaw, Asst. VP

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00

INHS18(10/99)