## M05000003278

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JUN 1 7 2005

## NewCo Corporate Services, Inc.

875 Avenue of the Americas Suite 501 New York, New York 10001

Telephone: (212) 356-8340

Internet Address: gerri@newcocorporate.com

Fax: (212) 356-8379

June 3,2 005

Secretary of State of Florida

RE: E/Pro Engineering and Environmental Consulting, LLC

Consumny, LLC Change of Agent -Florida

Dear Sir/Madam:

Enclosed please find Certificate of Change of Registered Office/Registered Agent on behalf of the above entity.

Please file the attached and return a filed-stamped copy to the attention of the undersigned at the above address.

If there are any problems, please contact the undersigned immediately at the following toll-free number 1-888-336-3926.

Thanking you in advance for your prompt attention to this matter.

Sincerely,

Gerri Mirando

Senior Specialist

Encls.

CHECK# 20906 Amounts 25.00

## 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 limit	ted liability company is:	E/Pro Engineering and Environm	mental Consulting, LLC
		ompany is: 249 Western Avenue	
Augusta, ME 04330			
October 4, 2002		M05000	0003278
3. Date of filing/registration in Florida		4. Document number	
5. The name of the regis Florida Department of		stered office address as shown	on the records of the
-	Howard Westerdahl		
		Name	-
	1001 W. Cypress Cree	ak Road - Suite 306B	
		Address	-
Fort Lauderdale, Florida 33309			
		, State and Zip	A. S.
6. The name and address	_	· •	EATTASS CATTASS
	NRAI Services, Inc.		SES
	2731 Executive Park D	<del></del>	FIL PM 3: 5  MALLAHASSEE, FLOR
	Florida street addres	ss (P.O. Box NOT acceptable)	RION 50
	Weston	FL 33331	
	City,	State and Zip	
and the business office of liability company, it is h	change or changes are not the registered agent we ereby confirmed that the ted liability company or of the limited liability of the liability of		of the registered office of a Florida limited d by an affirmative vote of
Martin H. Dodd, Secretary (Printed or typed name of signe			
	ointment as registered ons of all statutes relatived accept the obligation this document is being that the limited liabil	ngent and agree to act in this ca we to the proper and complete p ns of my position as registered filed to merely reflect a change ity company has been notified i	apacity. I further agree to erformance of my duties, agent as provided for in e in the registered office n writing of this change.

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

INHS18(10/99)