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SECRETARY OF STATE
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AND AHASSEF, CLOREDA



RA. Chang

CA Consiliente FEB 2 3 2005



ACCOUNT NO. : 072100000032

REFERENCE : 181602

7439590

AUTHORIZATION

COST LIMIT

ORDER DATE : February 2, 2005

ORDER TIME : 10:11 AM

ORDER NO. : 181602-015

CUSTOMER NO: 7439590

CUSTOMER: Bea Battistoni

Industries Training

Suite 103

12425-28th Street North St. Petersburg, FL 33716

CHANGE OF AGENT

NAME: LABOR LINE SERVICES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX _ _ _ PLAIN STAMPED COPY

CONTACT PERSON: Amanda Haddan -- EXT# 2955

EXAMINER:

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

	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this hange is submitted for a corporation organized under the laws of the State of Florida	
	der to change its registered office or registered agent, or both, in the State of Florida.	
1. The name o	f the corporation: LABOR LINE SERVICES, INC.	
2. The principal office address: 12425 28th Street North, Suite 103, St. Petersburg, FL 33716		
3. The mailing	address (if different):	
4. Date of inco	rporation/qualification: 01/18/1996 Document number: N96000000296	
	nd street address of the current registered agent and registered office on file with the artment of State:	
	Wilbur E. Brewton	
	225 South Adams Street, Suite 250	
	Tallahassee, FL 32301 ASRA 23 T	
6. The name ar (if changed):	nd street address of the new registered agent (if changed) and /or registered office	
	Corporation Service Company	
	1201 Hays Street	
	(P.O. Box NOT acceptable)	
	Tallahassee, FL 32301	
The street addr as changed wil	ress of its registered office and the street address of the business office of its registered agent, ll be identical.	
Such change wanthorized by	vas authorized by resolution duly adopted by its board of directors or by an officer so the corporation has been notified in writing of the change.	
Beatro	BEATRICE B. BAHISTONI, VICE PRESIDENT (Printed or typed name and title)	
I further agrée of my duties, a document is be corporation ha	t the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this wing filed merely to reflect a change in the registered office address, I hereby confirm that the as been notified in writing of this change.	
BY VM	ion Service Company Wille R-Vannor Ignature of Registered Agent) (Date)	
If signing on b	ehalf of an entity:	
	(Typed or Printed Name)	

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

Make Checks payable to Florida Department of State