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| Automated Transo                                       | uction | systems, loc.  |
| Automated Transo<br>Go Loca Street<br>9441 W. Sample R | i      | · + 200  |
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| Coral Springs He                                       | wide-  | <b></b>  |
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Examiner's Initials

Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) ☐ Walk in Pick up time Certified Copy Will wait Mail out Photocopy Certificate of Status **NEW FILINGS AMENDMENTS** ☐ Profit ☐ Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication ☐ Dissolution/Withdrawal Other ■ Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report ☐ Foreign Fictitious Name ☐ Limited Partnership ☐ Reinstatement Trademark Other V. SHEPARD FEB 28 2000

CR2E031(7/97)

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

| Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the  |
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| undersigned corporation organized under the laws of the State of   |
| 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 corporation is: Automated Transaction Systems, Inc  |
|  |
| 2. The mailing address of the corporation is: 1613 Sandpiper Trail E.  |
| Casselberry, Florida 32707   |
| 3. Date of incorporation/qualification: 01/10/00 Document number: P000000293   |
| 4. The name and address of the current registered agent and office:  |
| UCC Filing & Search Services, Inc.   |
| 526 E. Park Avenue  Tallahassee, FL 32301  5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)  Lora Street   |
| Tallahassee, FL 32301  |
| 5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)   |
| Lora Street  |
| 9441 W. Sample Road Suite 205  |
| Coral Springs, Florida 33065   |
| The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.  |
| Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.   |
| Lora Street . 02/09/00   |
| (Signature of an officer, chairman or vice chairman of the board) (Date)   |
| Lora Street / Vice President   |
| (Printed or typed name and title)  |
| Having been named as registered agent and to accept service of process for the above stated corporation, 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 obligation of my position as registered agent. |
| L t a lacka  |
| (Signature of Registered Agent) (Date)   |
| If signing on behalf of an entity:   |
| •  |
| (Typed or Printed Name) (Capacity)   |
| * * * FILING FEE: \$35.00 * * *  |