

P00000035659

Document Number Only

C T CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 (850)222-1092

City

State

Zip

Phone

CORPORATION(S) NAME

100003355961--7

-08/15/00--01002--017

\*\*\*\*210.00 \*\*\*\*35.00

RECEIVED  
00 AUG 14 PM 4:00  
DIVISION OF CORPORATION

Fenix Holdings, Inc.

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Profit                        | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger                    |
| <input type="checkbox"/> NonProfit                     |   |  |
| <input type="checkbox"/> Limited Liability Company     | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark                      |
| <input type="checkbox"/> Foreign                       |   |  |
| <input type="checkbox"/> Limited Partnership           | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other                     |
| <input type="checkbox"/> Reinstatement                 | <input type="checkbox"/> Reservation            | <input checked="" type="checkbox"/> Change of R.A. |
| <input type="checkbox"/> Limited Liability Partnership |   | <input type="checkbox"/> Fictitious Name           |
| <input type="checkbox"/> Certified Copy                | <input type="checkbox"/> Photo Copies           | <input type="checkbox"/> CUS                       |
| <input type="checkbox"/> Call When Ready               | <input type="checkbox"/> Call if Problem        | <input type="checkbox"/> After 4:30                |
| <input checked="" type="checkbox"/> Walk In            | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up        |
| <input type="checkbox"/> Mail Out                      |   |  |

Name
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Document Examiner
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Acknowledgment
W.P. Verifier

8/14

RDA Change  
8-14-00  
BHS

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THANKS

CONNIE BRYAN

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STATE  
TALLAHASSEE, FLORIDA

**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 undersigned corporation organized under the laws of the State of Florida 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: Fenix Holdings, Inc.
2. The mailing address of the corporation is: 1401 Forum Way, Suite 400, W. Palm Beach, FL 33401
3. Date of incorporation/qualification: April 7, 2000 Document number: P00000035659
4. The name and address of the current registered agent and office:

American Information Services, Inc.

350 E. Las Olas Blvd., Suite 1600

Ft. Lauderdale, FL 33301

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

CT Corporation System

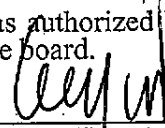
c/o CT Corporation System, 1200 S. Pine Island Rd.

Plantation, FL 33324

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TALLAHASSEE, FLORIDA  
STATE

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.

  
(Signature of an officer, chairman or vice chairman of the board)

7/28/00  
(Date)

WILLIAM J. MERCURIO, EXEC 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.

By: 

(Signature of Registered Agent)

8/7/00  
(Date)

If signing on behalf of an entity:

U

**VICKY GOLDSTEIN**  
**SPECIAL ASSISTANT SECRETARY**

(Typed or Printed Name)

(Capacity)

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