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LAW OFFICES  
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JEFFREY A. BERNSTEIN  
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August 28, 2000

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Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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-08/30/00--01036--008  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

RE: United Logistics Services, Inc.

Dear Sir or Madam:

Please find attached a Statement of Change of Registered Office or Registered Agent and my check in the amount of \$35.00. Please file the change of registered agent.

Thank you for your attention to this matter.

Very truly yours,

LAW OFFICES OF BERNSTEIN & BERGER

BY

JEFFREY A. BERNSTEIN, ESQ.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**Florida Department of State, Jim Smith, Secretary of State**

**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.

1a. The name of the corporation is: UNITED LOGISTICS SERVICES, INC.

1b. Date of incorporation July 28, 2000 Document number P00000072186

2. The name and address of the current registered agent and office:

CORPORATION SERVICE COMPANY

1013 Centre Road, Wilmington, DE 19805

3. The name and address of the new registered agent and office:

(P.O. Box Not Acceptable)

Jeffrey A. Bernstein, Esq.

100 N. Biscayne Blvd., Suite 2608, Miami, FL 33132

The street address of its registered agent 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.

MARTHA URIBE, Director

Typed or printed name and title

SIGNATURE

DATE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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.

SIGNATURE

(Registered Agent)

DATE

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314**

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AUG 30 PM 1:56  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE