P01000047308

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Orlando

December 28, 2001

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

200004744912---7 -12/31/01--01054--020 *****35.00 *****35.00

RE: Florida Association of Truckers, Inc. Document Number P01000047308

Enclosed please the properly executed documents: Resignation of Registered Agent; Officer/Director Resignation; Statement of Change of Registered Agent; Application for Registration of Fictitious Name, with the appropriate fees attached. Please file and return the certificate of status to our office. If you have any questions in regards to this matter please do not hesitate to contact the undersigned.

Sincerely,

Luis A. Gonzalez, Esq. Registered Agent for

Florida Association of Truckers, Inc.

cc: Board of Directors

RAIROCHANSE 1.9.02 SECRETARY OF STATE DIVISION OF CORPORATIONS

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

the undersign submits the state of	the privisions of sections 607.0502, 61 gned corporation organized under the law following statement in order to change in Florida. The priving the corporation: Florida Assoc	vs of the State of ts registered office or regis	tered agent, or both, in
2. The maili	ng address of the corporation: 333 W.	27th Street, Orla	ndo, FL 32806
3. Date of in	acorporation/qualification:	Document number	P01000047308
			
4. The name	and address of the current registered age Anthony Suarez, Esq.	nt and Office:	
•	517 West Colonial Drive		OI DEC 31
•	Orlando, FL 32804		Co
5. The name	Orlando, FL 32804 and address of the new registered agent (P.O. Box Not Luis A. Gonzalez, Esq.	if changed) and/or registere Acceptable)	d office (if changed)
	135 West Central Blvd, Su		
	Orlando, FL 32801		
	Idress of its registered office and the stre inged, will be identical.		
	was authorized by resolution duly adopt yethe board. When the board with the board of an officer, charman or vice chairman of the board of the boar) [2]	s or by an officer so
	named as registered agent and to accept the appointment as registered to comply with the provisions of all stop of my duties, and I am familiar with and gent. (Signature of Registered Agent)		above stated act in this capacity. r and complete ny position as
If signing on be	chalf of on entity:		
	(Typed or Printed Name)	(Capacity)	

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