

P02000101939

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

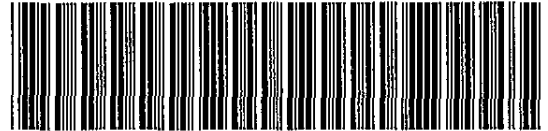
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500047554555

RA  
Change

FILED  
RECEIVED  
05 MAR 11 PM 12:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
STATE DEPARTMENT OF REVENUE

DR  
3/11/05



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032  
REFERENCE : 249560 7471501  
AUTHORIZATION : *Patricia Pigot*  
COST LIMIT : \$ 35.00

---

ORDER DATE : March 9, 2005

ORDER TIME : 10:18 AM

ORDER NO. : 249560-005

CUSTOMER NO: 7471501

CUSTOMER: Mr. Steven R. Graham  
Mr. Steven R. Graham  
P.O. Box 8785

Reston, VA 20195

---

CHANGE OF AGENT

NAME: S. GRAHAM CONSULTING, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight -- EXT# 2956

EXAMINER: \_\_\_\_\_

**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, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: S. GRAHAM CONSULTING, INC.
2. The principal office address: 8020 TOWER CRESCENT DRIVE  
VIENNA, VA 22182
3. The mailing address (if different): P.O. Box 8785  
RESTON, VA 20195
4. Date of incorporation/qualification: Sept. 20, 2002 Document number: P02000101939
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

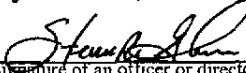
STEVE GRAHAM  
2520 LeJune Rd.  
CARL GARCES, FL 33134

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company  
1201 Hays Street  
(P.O. Box NOT acceptable)  
Tallahassee, FL 32301

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, or the corporation has been notified in writing of the change.

  
(Signature of an officer or director)

STEVEN GRAHAM  
(Printed or typed name and title)

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company  
By Cynthia L. Harris  
(Signature of Registered Agent)

3/11/05  
(Date)

If signing on behalf of an entity:  
**Cynthia L. Harris**  
**as its agent**

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

FILED  
05 MAR 11 PM 12:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA