

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 617-6380

From:
Account Name : C T CORPORATION SYSTEM
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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REGISTERED AGENT CHANGE

LABOCK TECHNOLOGIES, INC.

Certificate of Status	0
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Estimated Charge	\$35.00

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Electronic Filing Menu

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Help

Change
3-10-08

**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: LABOCK TECHNOLOGIES, INC.
2. The principal office address: 1600 NORTH PARK DRIVE, WESTON FL 33326
3. The mailing address (if different): SAME AS ABOVE
4. Date of incorporation/qualification: 11/26/2002 Document number: P02000125796
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
JOHN QUARANTA
1600 NORTH PARK DRIVE
WESTON FL 33326

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

C T Corporation System
c/o C T Corporation System, 1200 South Pine Island Road
(P.O. Box NOT acceptable)
Plantation, Florida 33324

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)

GENERAL COUNSEL AND SECRETARY
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity, 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.

By: Madonna Cuddihy
(Signature of Registered Agent)

3/7/08
(Date)

If signing on behalf of an entity:

Madonna Cuddihy
Special Assistant Secretary

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR26045 (8/05)

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