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C T CORPORATION SYSTE	~			
Requestor's Name 660 East Jefferson Str	<u> </u>			
Address Tallabassee, Florida			بين المارا -	
City State Zip	Phone 904-222-1092 TION(S) NAME	500	002624415- -08/25/380104001 ******35.00 ******35	
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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 Delaware 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: Risk Innovations Service & Consulting, Inc.
1b. Date of incorporation August 13, 1985 Document number P07087
2. The name and address of the current registered agent and office:
William C. Scisciani
4010 Boy Scout Blvd., Suite 900, Tampa, FL 33607-4151
3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) C T CORPORATION SYSTEM
c/o C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation Florida 3332
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.
1A16 (17 (D) 10 66 9
SIGNATURE (Type or printed name and title)
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. C T CORPORATION SYSTEM SIGNATURE BY: Allan Farnell (Registered Agent) DATE
DATE <u>Hugust 10, 1998</u> Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
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Filing Fee: \$35.00

(FLA, -2194 - 3/4/92)

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