Document Number Only

CR2E031 (1-89)

CT CORPORATION SYSTEM				
660 EAST JEFFERSON STREE	et			
Requestor's Name TALLAHASSEE, FL 32301		. , ,	11. 12. 12. 12. 12. 12. 12.	
Address 222-1092		2UUUU22912123 -03/12/3701001004 ++++35.00 *****35.00		
City State Zip CORPORATIO	Phone N(S) NAME			
Time Couton	er Spivice,	-w. PA Ohan	TALLAHASSLE!	97 SEP
() Profit () NonProfit () Limited Liability Co.	() Amendm	nent	FLORIDA FLORIDA () Merger	PH 12: 18
() Foreign	() Dissoluti	on/Withdrawal	() Mark	
() Limited Partnership () Reinstatement	() Annual F () Reserva		() Other () Change	of R.A. ous Name Filing
() Certified Copy	() Photo Co	opies	() CUS	
() Call When Ready Walk In () Mail Out	() Call if Pro () Will Wait		O After 4:30 Pick Up:	97 SE
Name Availability 2 97 Document Examiner (SEP 11	1997	CF CORPCRATION	CEIVED P 11 PH 2: 32
W.P. Verifier				

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: Time Customer	Service,Inc.	97 SELLA
1b. Date of incorporation	Document number_	ASSE.
2. The name and address of the current registered The Prentice Hall Corporation System Inc.	agent and office:	D PH 12: 18 FLORIDA
3. The name and address of the new registered age (P.O. Box Not Acceptable) C T CORPORATION SYSTEM	ent and office:	
c/o C T CORPORATION SYSTEM, 1200 South Pine	Island Rd., Plantati	ion, Florida 33324
The street address of its registered agent and the sof its registered agent as changed will be identical.	treet address of the bu	ısiness office
	opted by its board of d chard I. Friedman, As ed or printed name and	ssistant Secretary

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 BY Elemon Hours

(Registered Agent) 7

DATE STATEMENT OF THE STA

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

CR2EO45 (7-91) (FLA. - 2194 - 3/4/92) **FILING FEE: \$35.00**