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Florida Department of State Division of Corporations Public Access System

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To:

Division of Corporations : (850)617-6380

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone

: (561)694-8107 : (561)694-1639 Fax Number

Filing Menu

REGISTERED AGENT CHANGE

SUPERIOR TECHNICAL RESOURCES, INC.

Certificate of Status	0
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Estimated Charge	\$35.00

Corporate Filing Menu

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2/20/08 2:09 PM

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

Pursuant to the provisions of section 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 New York in order to change its registered office or registered agent, or both, in the State of Florida.

I.	The name of the corporation is: Superior Technical Resources	
2.	2. The principal office address: 250 INTERNATIONAL DR PO BOX 9057	
	WILLIAMSVILLE NY 14231	
3.	The mailing address (if different):	
4.	Date of incorporation/qualification: 11/7/1988 Document Number: P21652	
5.	5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: BARTON STANLY	
	1571 ROBERT J CONLON BLVD. NE STE 106	
	PALM BAY FL 32905	
6.	6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
	Corporate Creations Network Inc.	
	11380 Prosperity Farms Road #221E	
	D. D. J. C. 1. T. Addition	
1 8	he street address of its registered office and the street address of the business office of its registered gent, 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.		
_	by S. Simons as attorney-in-fact. (Signature of an officer or director) (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.		
_	(Signature of Registered Agont) (Date)	
If signing on behalf of an entity:		
Samantha Simons, Assistant Secretary (Typed or Printed Name)		

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

Corporate Creations International Inc. 11380 Prosperity Farms Road #221E Palm Beach Gardens FL 33410 (561) 694-8107 APPHOVE:

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