



ACCOUNT NO.

072100000032

REFERENCE

950629

4320738

AUTHORIZATION

COST LIMIT :

\$ 35.00

ORDER DATE: January 2, 2001

ORDER TIME :

9:28 AM

ORDER NO. : 950629-015

CUSTOMER NO: 4320738

CUSTOMER: Ms. Jacquie Feddock

Anteon Corporation

3211 Jermantown Road Ste 700

P.o. Box 10107 Fairfax, VA 22030 900003525129-

CHANGE OF AGENT

NAME: SHERIKON INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CONTACT PERSON: Janna Wilson

G. COULLIETTE JAN 0 52001

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

the undersigned corporation organized under the laws of the State of Louisiana
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.
1. The name of the corporation is:
SHERIKON INC.
2. The mailing address of the corporation is:3211 Jermantown Rd., Fairfax, VA 22030
3. Date of incorporation/qualification: July 6, 1989 Document number: P25084
4. The name and address of the current registered agent and office:
ROBERT BARRERA
12249 SCIENCE DRIVE
ORLANDO, FL 32826
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
Corporation Service Company
1201 Hays Street
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.
Citiz 9 della
(Signature of an officer, chairman or vice chairman of the board) (Date)
CURTIS SCHEHR, Vice President (Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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.
Corporation Service Company By: DOLD 10 Butto 1-4-01
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
DOLORES BURTON Assistant Vice President
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *
CR2EO45(7/97)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314