P25994

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	» #)
PICK-UP	MAIT WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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09/03/04--01026--016 **35.00

SECRETARY OF STATE

RA Change 09/13/04 DC

PREMIER CORPORATE SERVICES, INC.

200 West Adams Street, Suite 2007 Chicago, IL 60606 (312) 346-3606 (800) 934-2556 Fax: (312) 346-3607

August 30, 2004

VIA REGULAR MAIL

Division Of Corporations Florida Department Of State 409 E. Gaines Street Tallahassee, FL 32399

RE: SITE PERSONNEL SERVICES, INC.

Dear Sir or Madam:

Enclosed please find one original and one photocopy of the form to change the registered agent/office for the above captioned in your state. Also enclosed is a check for the required fee.

Please file with your office and return evidence to my attention at the letterhead address.

If you have any questions, please contact me on our toll-free line at 800-934-2556, prior to returning the documents.

Thank you.

Sincerely,

Tony Alexander

TA/smc. Encl.

4 SEP -3 PH 3

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

	provisions of sections 607.0502, 617.050 itted for a corporation organized under th	2, 607.1508, or 617.1508, Florida Statutes, thi the laws of the State of Wisconsin	is statement of in order
=	gistered office or registered agent, or both	-	
1. The name of	the corporation: Site Personnel Service	es, Inc.	
2. The principal	office address: N 48 W16550 Lisbon R	toad, Menomonee Falls, WI 53051	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 9/8/1989	Document number: P25994	
	d street address of the current registered artment of State:	gent and registered office on file with the	
	CT CORPORATION SYSTEM		
	1200 S. PINE ISLAND ROAD	£.	
	PLANTATION FL 33324		ORETA AHAS
6. The name and (if changed):	d street address of the new registered agen	at (if changed) and /or registered office	CRETARY OF STATI
	NRAI Services, Inc.		STAT LORI
	526 E. Park Avenue		<u> </u>
	(P.O. Box or personal n	nailbox NOT acceptable)	
	Tallahassee, FL 32301		
The street addre changed will be	ess of its registered office and the street and the	address of the business office of its registered	I agent, as
Such change wa	as authorized by resolution duly adopted e corporation has been notified in writin	by its board of directors or by an officer so a	authorized by
Mou	(1) J. HOUNGS	Monica J. Holmes, Secretary (Printed or typed name and title)	
•	the appointment as registered agent and comply with the provisions of all state familiar with and accept the obligation by to reflect a change in the registered owniting of this change.	d agree to act in this capacity, the strength of the proper and complete perform of my position as registered agent. Or, if the office address, I hereby confirm that the corporation of	
f signing on be	half of an entity:		
Anthony J. Ale	exander	Asst. Secretary	
*	(Tured or Printed Name)	(Canacity)	~~~~

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