8671

ACCOUNT NO. : 07210000003

7287317

\$ 35.00

COST LIMIT :

ORDER DATE: January 31, 2002

ORDER TIME : 10:55 AM

ORDER NO. : 178755-240

CUSTOMER NO:

7287317

CUSTOMER:

Ms. Amy Crisp

Echelon Companies

Suite 200

450 Carillon Parkway

Saint Petersbur, FL 33716

CHANGE OF AGENT

800004853548-

NAME:

PLM TRANSPORTATION EQUIPMENT

CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Ellyn Herndon

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

the undersigned corporation organized under the laws of the State of California
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 corneration: PIM Transportation Equipment Corneration.
1. The name of the corporation: PLM Transportation Equipment Corporation
2 The mailtiment 11 Cut and
2. The mailing address of the corporation: 200 Nyala Farms, Westport, CT 06880
3. Date of incorporation/qualification: 3/21/1990 Document number: p28671
4. The name and address of the current registered agent and office:
C T Corporation System
1200 South Pine Island Road
Plantation, FL 33324
5. The name and address of the new registered agent (if changed) and/or registered office (if changed): (P. O. Box Not Acceptable)
Corporation Service Company
1201 Hays Street
Tallahassee, Florida 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.
(Signature of an officer, chairman or vice chairman of the board) (Date)
(Signature of an officel, chairman or vice chairman of the board) (Date)
Stephen M. Bess, 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.
Cleborah 10. Skipper d-1-0a (Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Corporation Service Company, (Typed or Printed Name) Deborah D. Skipper Asst. V. Pres. (Capacity)
* * * FILING FEE: \$35.00 * * *

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314