## P34136

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660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092	ECEINED	<i>a</i>	C. Coulliste	DEC 1 0 20	01	

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Tel. 850 222 1092 Fax 850 222 7615

## 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 US Virgin Islands
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: Henry Lee Export Corporation
1. The name of the corporation: Henry Lee Export Conjunction
The state of the s
2. The mailing address of the corporation:
3301 N.W. 125th Street, Migmi, FL 33/67
3. Date of incorporation/qualification: 4-29-91 Document number:
4. The name and address of the current registered agent and office:
Steve J. Trocke
2201 NIVI 10 5th 6t
3001 N.W. 125 OT.
5. The name and address of the new registered agent (if changed) and/or registered office (if changed):
5. The name and address of the new registered agent (in changed) and of registered since (P. O. Box Not Acceptable)
C T Corporation System
c/o C T Corporation System, 1200 South Pine Island Road,
Plantation, Florida 33324
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.
12-5-01
(Signature of an officer, chairman or vice chairman of the board) (Date)
Richard N Phealey Sr. Vice Pres. 9 CFO
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.
CT Corporation System  [270]  By: (Date)
(Signature of Resident Agent)
If signing on behalf of an entity:  TARA COFER ASSISTANT SECRETARY
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314