AUTHORIZATION

atucia Pyint

COST LIMIT

\$ 35.00

ahouse

ORDER DATE: October 12, 2001

ORDER TIME: 4:27 PM

ORDER NO. : 932983-005

CUSTOMER NO:

8976A

CUSTOMER: Ms. Sharon Staffon

Demetrios Economou, P.a. 8152 Washington Street

Port Richey, FL 34668

RECEIVED
ON OCT 15 M 9:05
NUSION OF COMPCRATIONS
TAILANASSEE, FLORIDA

CHANGE OF AGENT

500004635575--1

NAME:

SHOE COMFORT, INC.

TILED

OCT 15 PM 12: 3

ECKETAINY OF STATE

ALLAHASSEE, FLORID

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Ellyn Herndon -- EXT# 1145

EXAMINER:

10/17/01

402250, 00524, 00672



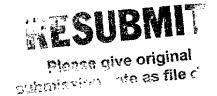
FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 16, 2001

CSC 1201 Hays Street Tallahassee, FL 32301

SUBJECT: SHOE COMFORT, INC.

Ref. Number: P92000002017



We have received your document for SHOE COMFORT, INC. and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

The date of incorporation on line 3 is not the same as the date that is listed on our records.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey Corporate Specialist

Letter Number: 901A00057206

DEPAR I MENT OF STATE DIVISION OF CORPORATIONS TALLAND TALLAND

01 OCT 17 AN 11: 34

BECEINED

If signing on behalf of an entity:

JOHN HNILICA

(Typed or Printed Nname)

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

Pursuant to the provisions of Sections 607.0502 and 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, 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: SHOE COMFORT, INC.	
2. The mailing address of the corporation: 6634 Ridge Ros	ad, Port Richey, FL 34668
3. Date of incorporation/qualification: 11/4/1992	Document Number: P92000002017
4. The name and address of the current registered agent a	ind office:
BARBARA BARTLETT 4584 Commercial Way Spring Hill, FL 34606	FIL O1 OCT I SECNETAIN TALLAHASS
The name and address of the new registered agen changed): (P. O. BOX IS NOT ACCEPTABLE)	
JOHN HNILICA 6634 Ridge Road Port Richey, FL 34668	12: 33 TATE ORIDA
The street address of its registered office and the street ada agent, as changed, will be identical.	dress of the business office of its registered
Such change was authorized by resolution duly adopted by corporation so authorized by the board.	its board of directors or by an officer of the
Signature of an officer, chairman or vice chairman of the board)	1/28/01
JOHN HNILICA, PRESIDENT Printed or typed name and title)	Bate
Having been named as registered agent and to accept corporation, I hereby accept the appointment as registered further agree to comply with the provisions of all statuderformance of my duties, and I am familiar with and accept	agent and agree to act in this capacity. I
los L. Hintin	7/28/01
(Signature of Registered Agent)	(Date)

FILING FEE \$35.00

PRESIDENT

(Capacity)