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(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	
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C. Coulliette APR 1 1 2003



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## **CT** CORPORATION SYSTEM

April 11, 2003

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399

Re: Order #: 5829106 SO Customer Reference 1: Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Ivy Services, Inc. (FL) Change of Agent Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Brigham Weir Fulfillment Specialist Brigham\_Weir@cch-lis.com

660 East Jefferson Street Tallahassee, FL 32301 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 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 : Ivy Services, Inc.

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1. The name of the corporation	141
2. The mailing address of the corporation : 925 S. Fe	ton, El 33432 552 = E
3. Date of incorporation/qualification: 06/02/93	_Document number: <u>P93000039109</u>
4. The name and address of the current registered agent and ol	ffice:
Beverly J. Yanowitch	<b>3</b>
925 S. Federal Highway, Boca Raton FL 33432	
5. The name and address of the new registered agent (if chang (P. O. Box Not Accepta	
C T Corporation System	······
c/o C T Corporation System, 1200 South Pine Island I	Road,
Plantation, Florida 33324	· · · · ·
The street address of its registered office and the street addre agent, as changed, will be identical.	ess of the business office of its registered
Such change was authorized by resolution duly adopted by it authorized by the board.	ts board of directors or by an officer so
hours, shills	$\frac{4-9-0.3}{(Date)}$
(Signature of an officer, chairman or vice chairman of the board)	(Date)
(Printed or typed name and title)	
Having been named as registered agent and to accept servic corporation, I hereby accept the appointment as registered a I further agree to comply with the provisions of all statutes r performance of my duties, and I am familiar with and accep registered agent. C T Corporation System	e of process for the above stated agent and agree to act in this capacity. elative to the proper and complete t the obligation of my position as
By: Comit Bui	4/1103
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity: SPECIAL ASSISTANY SI	-
(Typed or Printed Name)	(Capacity)
* * * FILING FEE: \$35.0	)0 * * *
CR2E045(9/00)	
DIVISION OF CORPORATIONS P.O. BOX 6327	TALLAHASSEE, FL 32314