3000078498



ACCOUNT NO. : 07210000032

REFERENCE: 950629

4320738

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE: January 2, 2001

ORDER TIME : 9:30 AM

ORDER NO. : 950629

CUSTOMER NO: 4320738

CUSTOMER: Ms. Jacquie Feddock

Anteon Corporation

3211 Jermantown Road Ste 700

P.o. Box 10107 Fairfax, VA 22030 700003525127--4

CHANGE OF AGENT

NAME: SHERIKON SPACE SYSTEMS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Janna Wilson -- EXT# 1155

EXAMINER:

₩ OOULUETTE JAN 0 5 2001

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

Pursuant to the provisions of sections 607.0502, the undersigned corporation organized under the law	
	its registered office or registered agent, or both, in
the State of Florida.	
1. The name of the corporation is: Sherikon Space	Systems, Inc.
2. The mailing address of the corporation is:	
3211 Jermantown Rd., Fairfax, VA 22030	
3. Date of incorporation/qualification: 11/08/1993	Document number: P93000078498
4. The name and address of the current registered ag	in the second se
Robert P Knowlton	
12249 Science Dr.	
Orlando, FL 32826	
5. The name and address of the new registered agent	and office: (P. O. Box Not Acceptable >
Corporation Service Company	
1201 Hays Street	
Tallahassee, Florida 32301	
agent, as changed, will be identical.	treet address of the business office of its registered
Such change was authorized by resolution duly add authorized by the board.	opted by its board of directors or by an officer so
Citiz Seleha	ાગાશીવ
(Signature of an officer, chairman or vice chairman of the	board) (Date)
Curtis Schehr, Vice President	
(Printed or typed name and title)	ot service of process for the above stated
Having been named as registered agent and to accept corporation, I hereby accept the appointment as registered agree to comply with the provisions of all st performance of my duties, and I am familiar with an registered agent.	stered agent and agree to act in this capacity. atutes relative to the proper and complete I accept the obligation of my position as
Dolo Din Buth	1-4-01
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
Dolores Burton	Assistant Vice President
(Typed or Printed Name)	(Capacity)
* * * FILING FEE: \$35.00 * * *	

CR2EO45(7/97)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314