P93000084427

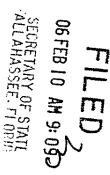
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Night Shift Temps Inc. (Name of Corporation) DOCUMENT NUMBER: P93000084427
DOCUMENT NUMBER: 193000084427
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Denise Russell
(Name of Contact Person)
Eamont & Auchampau, P.A.
(Firm/Company)
P.O. Box 6026
(Address)
Clearwater, FL 33758
(City/State and Zip Code)
For further information concerning this matter, please call:
Denise Russell at (727) 772_7344 (Name of Contact Person) (Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Street Address: Amendment Section Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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, this Florida statement of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: 33759 2. The principal office address: 3040 Gulf To Bay Blvd., Clearwater, 33759 3. The mailing address (if different): 4. Date of incorporation/qualification: Document number: 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: David A. Lamont, ESquire 30750 U.S. 19 N Palm Harbor, FL 34684 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): David A. Lamont, Esquire 3040 Gulf To Bay Blvd. (P.O. Box NOT acceptable) Clearwater, FL 33759 The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical. was authorized by resolution duly adopted by its board of directors or by an officer so the corporation has been notified in writing of the change. authoriz Frank Möngelluzzi, MPST Applithe appointment as registered agent and agree to act in this capacity. The complete performance the comply with the provisions of all statutes relative to the proper and complete performance is, and I am familiar with and accept the obligation of my position as registered agent. Or, if this is being filed merely to reflect a change in the registered office address, I hereby confirm that the new first performance in the specific part of the property of this change. of my duth document' boratidn hàs February 6, 2006 (Signature of Registered Agent) If signing on behalf of an entity:

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

* * * FILING FEE: \$35.00 * * *

(Typed or Printed Name)