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C T CORPORATION SYSTEM	. =		PM 2: 36 FE. FLORIDE
Requestor's Name 660 East Jefferson Stree	et		SRIDA SRIDA
Address Tallahassee, FL 32301	(850)222-1092		
City State Zip	Phone ON(S) NAME	10	0003119351 -02/01/0001110016 *****35.00 ******35.0
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CR2E031 (1-89)

Florida Department of State, Jim Smith, Secretary of State

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

Pursuant to the provisions of sections 60 Florida Statutes, the undersigned corpora submits the following state or registered agent, or both, in the State	ation organized under the laws of the S atement in order to change its registen	State of
1a. The name of the corporation is: Adap	ot Communication Supply CoS. Fl.	Inc.
1b. Date of incorporation March 3, 1994	Document number 194	
2. The name and address of the current	registered agent and office:	OO FEB
6454 E. Rogers Circle; Boca Raton, B	FL 33487	
The name and address of the new rec (P.O. Box Not Acceptable)	46	ED PN 2: 36
c/o C T CORPORATION SYSTEM, 1200 Sout	th Pine Island Rd., Plantation Flo	
Such change was authorized by resolution an officer so authorized by the board.	n duly adopted by its board of directors (Type or printed name and title)	
	H. M. Smith, Secretary	
HAVING BEEN NAMED AS REGISTERED PROCESS FOR THE ABOVE STATED CONTINUES OF ACCESS FOR THE ABOVE STATED CONTINUES AGENT AND AGREE TO ACT IN THIS CANNOT THE PROVISIONS OF ALL STATUPLETE PERFORMANCE OF MY DUTIES, THE OBLIGATION OF MY POSITION AS SIGNATED DATE	ORPORATION AT THE PLACE DESIGNED THE APPOINTMENT AS REGISTE APACITY. I FURTHER AGREE TO CONTES RELATIVE TO THE PROPER AND AND I AM FAMILIAR WITH AND ACCUREGISTERED AGENT. \(\text{T} CORPORATION SYSTEM \)	GNATED RED MPLY D COM- EPT
Division of Corporations, P.O	. Box 6327, Tallahassee, FL 32	2314
CR2E045 (7-91)	Filing Fee: \$	

JAN 19 '00 10:08

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