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SHEPARD & LESKAR, P.A.

ATTORNEYS AT LAW

100 SOUTH PINE ISLAND ROAD SUITE 201 PLANTATION, FLORIDA 33324 400002858374--4 -04/30/99--01082--011 *****35.00 ******35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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	2. (Corporation Name)						ŽΫ́.	99
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	NEW FILINGS		AMEND	MENTS				
	Profit		Amendment	:				
	NonProfit		Resignation	of R.A., Officer/	Director			
	Limited Liability		Change of R	Registered Agent				
	Domestication		Dissolution	/Withdrawal				
	Other		Merger			n oral		
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Reinstatement

Trademark

Other

Examiner's Initials

Name Reservation

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, undersigned corporation organized under the laws of the State ofFLORIDA	, Florida Statutes,	the
submits the following statement in order to change its registered office or registered	l agent, or both, in	the
State of Florida. 1. The name of the corporation is: 931 MHZ PAGING CORP.		
2. The mailing address of the corporation is: 1499 W. PALMETTO PARK 1 BOCA RATON, FL 33486		
3. Date of incorporation/qualification: 3-27-95 Document number:		0
4. The name and address of the current registered agent and office:		
SHEPARD, LESKAR & LEVINE, P.A. 409 S.E. 7th STREET	SEU SEU	
FT. LAUDERDALE, FL 33301 5. The name and address of the new registered agent and office: (P. O. Box Not Acce	<i>က</i> မ ™	
SHEPARD & LESKAR, P.A.	0F SI	T
PLANTATION, FL 33324	ATE 06	
The street address of its registered office and the street address of the business of agent, as changed, will be identical.	fice of its registere	eđ
Such change was authorized by resolution duly adopted by its board of directors authorized by the board?	or by an officer so)
(Signature of an officer, chairman or vice chairman of the board) (In the state of the board)	3/15/9 Q Date)	
(Printed or typed name and title)		
Having been named as registered agent and to accept service of process for the accorporation, I hereby accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the proper of the proper of the proper of the proper of the accept the obligation of my registered agent.	bove stated it in this capacity. and complete position as	
(Signature of Registered Agent) (Date)	3-99	
If signing on behalf of an entity: Novat hepad (Typed or Printed Name) (Capacity)	42.	

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