## 7600049270



ACCOUNT NO. : 072100000032

REFERENCE: 492208

7133611

AUTHORIZATION :

ORDER DATE: March 25, 2002

ORDER TIME: 3:38 PM

ORDER NO. : 492208-010

CUSTOMER NO: 7133611

CUSTOMER: Ms. Barbara Murphy

Sykes Enterprises,

Suite 3900

100 North Tampa Street

Tampa, FL 33602

## CHANGE OF AGENT

900005419839--6

NAME:

SYKES ENTERPRISES,

INCORPORATED

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Carla E. Lohi -- EXT# 1132

EXAMINER:

C. Coulliste MAY 0 1 2002

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

| the undersigne                     | d corporation organized und                                      | er the laws of the State of _                          |  |             |
|------------------------------------|--|--|--|-------------|
| •                                  | •  | change its registered offic                            | ce or registered agent, or both, in  |             |
| the State of Flo<br>1. The name of | f the corporation :  |  |  |             |
|                                    | ERPRISES, INCORPORATED   |  |  |             |
| -                                  |  | Suite 3000 100 NOPER                                   | T TAMPA COPPED   |             |
| _                                  | address of the corporation:_                                     | Baice 33007 100 NOMIN                                  | TAMPA STABLE   | —           |
| TAMPA, FI                          |  |  | 70,600,01,0270   | _           |
|                                    | orporation/qualification: Marc                                   |  | nent number:   | <del></del> |
| 4. The name ar                     | nd address of the current regis                                  | stered agent and office:                               | AET MAY  | П           |
|                                    | CT Corporation System  |  | ASSA -   |             |
|                                    | 1200 South Pine Island Ro  | oad  | TO P   | ED          |
|                                    | Plantation, FL 33324   |  |  |             |
| 5. The name ar                     |  | ed agent (if changed) and/o Box <b>Not</b> Acceptable) | or registered office (if Ringed  |             |
|                                    | •  | • •  |  |             |
|                                    | Corporation Service Compa  | any  | ·····  |             |
|                                    | 1201 Hays Street   |  |  |             |
|                                    | Tallahassee, FL 32301  |  | · .  |             |
| The street addagent, as chang      | ress of its registered office ar<br>ged, will be identical.      | nd the street address of the                           | e business office of its registered  |             |
| Such change vauthorized by         | vas authorized by resolution of the board.                       | duly adopted by its board                              | of directors or by an officer so   |             |
| B. Rocketol                        | k  |  | 4/17/02_   |             |
| (Signature                         | of an officer, chairman or vice chairn                           | nan of the board)                                      | (Date)   |             |
| ILLIAM N. RO                       | CKTOFF, Vice President   |  | ge · *   |             |
| xx · 7                             | (Printed or typed name and titl                                  |  |  |             |
| l further agree                    | e to comply with the provision<br>of my duties, and I am familia | ns of all statutes relative t                          | cess for the above stated<br>d agree to act in this capacity.<br>To the proper and complete<br>igation of my position as |             |
|                                    | Service Company  |  | 5/1/02   |             |
| _X. (M)                            | (Signature of Registered Agent)                                  |  | (Date)   |             |
| f signing on beh                   | alf of an entity:  | Laura R. Dunlap  |  |             |
|                                    | (0) 1 75 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1                       | as its agent   |  |             |
|                                    | (Typed or Printed Name)  |  | (Capacity)   |             |
|                                    | ***FII   | ING FEE: \$35.00 * * *                                 |  |             |
| TR2E045(9/00)                      |  |  |  |             |

P.O. Box 6327

TALLAHASSEE, FL 32314

DIVISION OF CORPORATIONS