1025 Vermont Avenue, NW Washington, DC 20005 Tel. 202 393 1747 Fax 202 393 1760

P960000 58927

December 24, 1997

Florida Department of State Division of Corporations P.O. Box 6327 Tallahasse, FL 32314 Re:

Copenhaver Holdings, Inc.

Majordomo Services, Inc.

Marks Office Furniture Acquisition Corp.

Office Supply of Feather Sound, Inc.

Prossaire Acquisition Corp.

The North Howard Corporation

Order #: 989672

Dear Sir or Madam:

Enclosed for filing are Statements of Change of Registered Office or Resident Agent or Both together with funds in payment of the required fees on behalf of these corporations. These documents should be filed upon receipt.

Evidence of these filings should be returned to this office.

If you have any questions or if for any reason the filings cannot be effected promptly, please notify this office of the details by calling our toll-free number: 1-800-336-3376.

Very truly yours,

Craig Hundley

Associate Customer Specialist

Team One

Ext. 3022

97 DEC 29 PM 1: SECRETARY OF STA TALLAHASSEE, FLOR

APPROVED FANSO

Florida Department of State, Jim Smith, Secretary of State

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

•	AGENT ON DO				
Florida Statutes, t Florida	rovisions of sections the undersigned corp submits the following	oration organi statement in c	zeo under tie iaw:	S OF IT IS STATE OF	
or registered age	nt, or both, in the Sta	ite oi Fiorida.			
1a. The name of	the corporation is: $\stackrel{P:}{\longrightarrow}$	rossaire Acq	uisition Corp.		<u>.</u>
1b. Date of inco	rporation July 15, 1	1996	Document num	obe <u>r (1960000) E</u>	<u>58</u> 927
	nd address of the cur	rent registered	l agent and office:		
Corporate Acces	ss, Inc.				-
1116 D Thomasy	ville Road, Tallaha	ssee, Florid	a 32303		~ ;
(P.O		e) RPORATION SYS	TEM	97 (a	<u>«</u>
c/o C T CORPO	DRATION SYSTEM, 1200	O South Pine	Island Rd., Plan	itation Emlorida	33324
of its registered	ess of its registered agagent as changed with as authorized by resc	Il be identical.		COSTON III	
an officer so aut	thorized by the board				
November	GNATURE 20, 1997 DATE	Typ	ed or printed name	and title	7
PROCESS FOR IN THIS CERTIL AGENT AND AGENT AND AGENT THE PROPERTY.	NAMED AS REGISTE THE ABOVE STATE FICATE, I HEREBY A GREE TO ACT IN TH DVISIONS OF ALL ST RMANCE OF MY DU' ON OF MY POSITION	ED CORPORATION OF THE ASSISTED THE ASSISTED OF	ION AT THE PLAC PPOINTMENT AS I FURTHER AGRI ATIVE TO THE PRO M FAMILIAR WITH RED AGENT.	REGISTERED EE TO COMPLY OPER AND COM- AND ACCEPT ORATION SYSTEM	

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

CR2E045 (7-91) (FLA. - 2194 - 3/4/92) **FILING FEE: \$35.00**