D16325 Gladys Shoes & Slippers 7808 NW 44th St. Sunrise, FL 33351 (954) 748-2560 City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) 2. (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time Certified Copy Walk in Photocopy Will wait Certificate of Status Mail out AMENDMENTS NEW FILINGS Profit Amendment NonProfit Resignation of R.A., Officer/ Director 100002262711--0-08/11/97--01025--003 Limited Liability Change of Registered Agent *****35.00 *****35.00 Domestication Dissolution/Withdrawal Other Merger OTHERFILINGS REGISTRATION/ QUALIFICATION Annual Report Forcign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other Examiner's Initials CR2E031(1/95)

Florida Department of State, Sandra B. Mortham, Secretary of State

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

undersigned corpo	rovisions of sections 607.0502, 6 ration organized under the laws o	f the State of <u>FLORI</u>)4
State of Florida.	ving statement in order to change	ils registered office or registe	red agent, or both, in the
	e corporation is: NOAH	ONE CORP	
	dress of the corporation is: 7		54
	SUNRISE, FL 3	333/	
3. Date of incorpo4. The name and a	oration/qualification:	Document number	r: 1960000 63258
	JOSEPH D. SU	VIDERSKI	5. 9
_		STATE ROLD 7	7 AL SECA
-		, 33063	75
5 The name and	address of the new registered agen		cceptable Online
5. The hame and a			
_	GLADYS CAS	ANOVA 1 44 TH ST	— DE 15
	7808 Nu	1 447454	
_	SUNRISE	FL 33351	
The street address agent, as changed	s of its registered office and the str , will be identical.	reet address of the business off	ice of its registered
Such change was authorized by the	authorized by resolution duly adop	pted by its board of directors o	or by an officer so
Gladen	Masoner pro	0/14/97	,
Signature of an office	flus are ples er, chairman or vice chairman of the board	(Date)	
GLADO	ys CASANOVA - Ple (Printed or ty	SIDENT	
	(Printed or ty	ped name and title)	· · · · · · · · · · · · · · · · · · ·
Having been nam I hereby accept th comply with the p and I am familiar	ed as registered agent and to acce ne appointment as registered agen rovisions of all statutes relative to with and accept the obligation of	ept service of process for the a t and agree to act in this capa to the proper and complete perj my position as registered age	bove stated corporation, city. I further agree to formance of my duties, nt.
Gladen	(Carmon	8/4/97	
(Signature o	PRegistered Agent)	(Date)	
If signing on beha	alf of an entity:		
NOAH ONE CORP		PRESIDEN	T
	rinted Name)	(Capaci	ty)

FILING FEE: \$35.00

CR2E045(1/95)