## CAPITAL CONNECTION, INC. STE Virginia Street Suite 1 of Tellower Florid 2000

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

00/FC/03 Inc.	8000028585083 -04/30/9901088019 ***1793.75 ******43.75
OFFICIENTS  OFFICE PRINTS  DIFFERENCE FRIDA  TALLAHASSEE, FLORIDA	Art of Inc. File
Signature Signature	Officer Search  Fictitious Search  Fictitious Owner Search  Vehicle Search
Requested by:	Driving Record  UCC 1 or 3 File  UCC 11 Search  UCC_11 Retrieval

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

## 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, of the undersigned corporation organized under the laws of the submits the following statement in order to change its registered of both, in the State of Florida.	617.1508, Florida Statutes
·	ince or registered agent, o
1a. The name of the corporation is:OO/FL/03, INC.	
1b. The mailing address of the corporation is:	
4200 Wackenhut Drive, #100, Palm Beach Gardens, Florida 3341	.0-4243
1c. Date of incorporation: 9/10/96 Document number	r: P96 0000 75327
2. The name and address of the current registered agent and office:	SET SET
4200 Wackenhut Drive. #100	APR 30 APR 30 APR 30
Palm Beach Gardens, Florida 33410-4243	
3. The name and address of the new registered agent and office:(P.O.)	Box Not Acceptable
Timothy J. Howard	
4200 Wackenhut Drive, #100	
Palm Beach Gardens, Florida 33410-4243	
The street address of its registered office and the street address of registered agent, as changed, will be identical.	the business office of its
Such change was authorized by resolution duly adopted by its board of authorized by the spard.	of directors or by an officer
(Signature of an officer, chairman or vice chairman of the board)	(Date)
F.E. Finizia, Corporate Counsel & Assistant Secretary	
(Printed or typed name and title)	
Having been named as registered agent and to accept service of procession, I hereby accept the appointmentas registered agent and a further agree to comply with the provisions of all statutes relative to performance of my duties, and I am familiar with and accept the or registered agent.	ocess for the above stated gree to actin this capacity, o the proper and complete bligation of my position as
	_
(Signature of Registered Agent)	(Date)
f signing on behalf of an entity:	
TIMOTHY J. HOWARD	
(Typed or Printed Name)	(Capacity)
Division of Corporations, P.O. Box 6327, Tallahassee	, FL 32314

FILING FEE: \$35.00

CR2E045(11/94)