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September 2, 1997

Via Certified Mail P 393 879 742

Florida Department of State
Corporate Records Bureau
Post Office Box 6327
Tallahassee, Florida 32301

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-09/05/97--01108--002
*****35.00 *****35.00

RE: TSB Resins, Inc.

Gentlemen:

Enclosed please find a Statement of Change of Registered Office or Registered Agent, or Both for the above-captioned corporation, along with a check in the amount of \$35.00 representing the charge for filing this document.

Should you require any additional information or have any questions regarding this matter, please contact the undersigned.

Very truly yours,

CAUTHEN & FELDMAN, P.A.

K. Wade Boyette, Jr.

K. Wade Boyette, Jr.

(Signed in his absence to expedite delivery)

KWB/se
Enclosures

cc: Mr. David A. Casey (w/o enclosure)

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APPROVED
AND
FILED
SEP - 5 AM 10:10
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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2A CM 97
9.5

Date Filed: November 1, 1996

**STATEMENT OF CHANGE OF REGISTERED OFFICE
AND REGISTERED AGENT**

Pursuant to the provisions of Section 607.0501 and 607.0502, or 607.1508, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office and registered agent in the State of Florida.

1. The name of the corporation is **TSB RESINS, INC.**
2. The name and address of its present registered agent is:

K. Wade Boyette, Jr., Esquire
215 North Joanna Avenue
Tavares, FL 32778
3. The name and street address to which its registered agent is to be changed is: (Post office box not acceptable)

David A. Casey
6101 Chancellor Drive, Ste. 200
Orlando, FL 32809
4. The street address of its registered office and the street address of the business office of its registered agent, as changed, are identical.
5. Such change was authorized by resolution duly adopted by its board of directors or by an officer of the corporation so authorized by the board of directors.

Name and Title

Signature: 
David A. Casey, President

Date: July 16, 1997

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT UNDER SECTION 607.0505, FLORIDA STATUTES.

Please Print/Type Name David A. Casey

Signature 

Date: July 16, 1997

FILING FEE \$35