

WILLIAMS & AIRTH, P.A.

ATTORNEYS AND COUNSELORS AT LAW

EMPIRE BUILDING

2500 Central Expressway
Orlando, Florida

REPLY TO
POST OFFICE BOX 3444
ORLANDO, FLORIDA 32802
FAX (407) 425-7718

December 12, 1996

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

RE: Statement of Change of Registered Agent

Enclosed please find Statement of Change of Registered Agent and our check in the amount of \$61.25 representing your filing fees and return of a certified copy of the amendment and certificate of status.

Thank you.

Sincerely yours,

Warren E. Williams
Warren E. Williams

WEW:sk

forms/irs

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-12/18/96--01005--003
*****61.25 *****61.25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
FILED

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& Carol

Florida Department of State, Jim Smith, Secretary of State

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

Pursuant to the provisions of sections 807.0502, 817.0502, 607.1603, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: _____
SAMS ATLANTA, INC.

1b. Date of Incorporation 12-10-96 Document number P96000099734

2. The name and address of the current registered agent and office:
Capital Connection, Inc. 417 E. Virginia St., #1,
Tallahassee, FL 32301

3. The name and address of the new registered agent and office:
(P.O. Box Not Acceptable)
Warren E. Williams, Esq.
28 West Central Boulevard, Orlando, FL 32801

The street address of its registered agent and the street address of the business office of its registered agent as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

X
12/13/96

SIGNATURE

DATE

Warren E. Williams, President
Typed or printed name and title

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.

X

SIGNATURE
(Registered Agent)

DATE 12-13-96

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

CR2E045 (7-91)

FILING FEE: \$35.00

APPROVED
AND
FILED

96 DEC 16 PM 12:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA