

P96000103228

Documentor's Name

**PrimePay**  
YOUR PAYROLL SERVICES SOLUTION®

5440 BEAUMONT CENTER BLVD.  
SUITE 445  
TAMPA, FL 33634

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
01 AUG -9 PM 12:13

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #) 100004527421--3  
-08/09/01--01072--009  
\*\*\*\*245.00 \*\*\*\*\*35.00
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

V SHEPARD AUG 20 2001

Examiner's Initials

**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, 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.

1. The name of the corporation : M.K.D.E. INC

2. The mailing address of the corporation : 5440 BEAUMONT CENTER BLVD  
SUITE 445 TAMPA, FL 33634

3. Date of incorporation/qualification: 12-24-1996 Document number: 996 000 1032288

4. The name and address of the current registered agent and office:

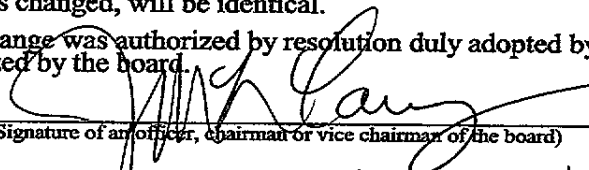
JAMES E. HOALMER  
5440 BEAUMONT CENTER BLVD STE 445  
TAMPA, FL 33634

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  
(P. O. Box Not Acceptable)

Sherree R. Bryce  
5440 BEAUMONT CENTER BLVD #445  
TAMPA FL 33634

The street address of its registered office 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.

  
(Signature of an officer, chairman or vice chairman of the board)

7/30/01  
(Date)

Joseph L. Canney Executive Vice President  
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

  
(Signature of Registered Agent)

7/30/01  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(Capacity)

\*\*\* FILING FEE: \$35.00 \*\*\*

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
AUG-9 PH 12:13