

P97000001804

Requester's Name

**PrimePay**  
YOUR PAYROLL SERVICES SOLUTION®

5440 BEAUMONT CENTER BLVD.  
SUITE 445  
TAMPA, FL 33634

Office Use Only

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
01 AUG -9 PM 12:10

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

1. \_\_\_\_\_  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

700004527417--5  
-08/09/01--01072--008  
\*\*\*\*\*70.00 \*\*\*\*\*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

**AMENDMENTS**

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

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

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

RA Chg.

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 : PRIME SOURCE MANAGEMENT SOLUTIONS, INC

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

3. Date of incorporation/qualification: 1-8-1997 Document number: P97000001804

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

JAMES E. HOLLIER  
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)

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

7/30/01  
(Date)

Joseph L. Carney 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]  
(Signature of Registered Agent)

7/30/01  
(Date)

If signing on behalf of an entity:

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

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

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

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