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December 17, 1997

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

12/19/97--01047--003 \*\*\*\*\*35.00 \*\*\*\*\*35.00

Re: Change of registered agent for Simhar Co., Inc.

Dear Ladies and Gentlemen:

Enclosed herewith please find a statement of change of registered office or registered agent for Simhar Co., Inc. Also enclosed please find the filing fee of \$35.00.

I thank you in advance for your assistance with this filing. If you are in need of any additional information please contact the undersigned.

Very truly yo

Russell S. Simonetta, Esquire

RSS/cev Enclosure

cc: Henry Simonetta, Jr.

R-A. Change 01-02-98

## 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, 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: SIMHAR CO., INC. 1b. The mailing address of the corporation is : 30/2Document number: <u>P9700003738</u> 1c. Date of incorporation: Financy 14, 1997 The name and address of the current registered agent and office: C.S.C. Corp. P.O. Box 13397 Philadephia, PA 19101-3397 3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) 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 // 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) .f signing on behalf of an entity:

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

(Capacity)

(Typed or Printed Name)