CAPITEAL CONNECTION, INC. POOD 3965

| 417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222 | OO OCT 26 PM 3 20 SECRETARY OF STATE TALLAHASSEE, FLORIDA | |
|---|---|--|
| OASis OutSourding II, Inc. | 400003440704 -10/26/0001051018 ***1356.25 *****43.7 | |
| a sur | Art of Inc. File LTD Partnership File Foreign Corp. File L.C. File Fictitious Name File Fictitious Name File Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Status Certificate of Fictitious Name Corp Record Search | |
| G COULLIETTE OCT 2 6 2000 | Officer Search Fictitious Search | |
| Requested by: Date Time | Fictitious Owner Search Vehicle Search Driving Record UCC 1 or 3 File UCC 11 Search UCC 11 Retrieval | |
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Ponder's Printing - Thomasville, GA 8/00

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, of both, in the State of Florida. |
|--|
| 1a. The name of the corporation is: OASIS OUTSOURCING IV, INC. |
| 1b. The mailing address of the corporation is: 4200 Wackenhut Dr., #100, Palm Beach Gardens, FL. 33410 |
| 4200 Wackening DI., 1200, Talin Determ Galdens, 11. 33410 |
| 1c. Date of incorporation: 1/14/97 Document number: P97 0000 03965 |
| 2. The name and address of the current registered agent and office: |
| Timothy J. Howard |
| 4200 Wackenhut Dr., #100 |
| Palm Beach Gardens, FL 33410-4243 |
| 3. The name and address of the new registered agent and office:(P.O. Box Not Acceptable) |
| F.E. Finizia |
| 4200 Wackenhut Dr., #100 |
| Palm Beach Gardens, FL 33410-4243 |
| The street address of its registered office and the street address of the business office of it registered agent, as changed, will be identical. |
| registered agent, as changed, will be identical. Such change was authorized by resolution duly adopted by its board of directors or by an office |
| so authorized by the board. |
| (Signature of an officer, chairman or (Date) |
| wice chantilate of the board) |
| Richard R. Wackenhut (Printed or typed name and title) |
| Having been named as registered agent and to accept service of process for the above state corporation, I hereby accept the appointment as registered agent and agree to act in this capacity is 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 a registered agent. |
| (0 (24/00 |
| (Signature of Registered Agent) (Date) |
| If signing on behalf of an entity: |
| F.E. Finizia |
| (Typed or Printed Name) (Capacity) |
| Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 |

FILING FEE: \$35.00

CR2E045(11/94)