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REFERENCE

308486

**AUTHORIZATION** 

COST LIMIT

\$ 35.00

ORDER DATE: March 26, 1997

ORDER TIME : 12:55 PM

ORDER NO. : 308486 500002125485--4

CUSTOMER NO:

9347A

CUSTOMER: Stephen Buckley, Esq

Goldberg Goldstein & Buckley

1515 Broadway Street

P. O. Box 2366

Fort Myers, FL 33901

CHANGE OF AGENT

NAME:

THE LIGHTING TECHNOLOGY GROUP,

INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

Colument

CERTIFIED COPY

PLAIN STAMPED COPY

CONTACT PERSON:

Exist out Karen B. Roza Updatte

Ver Nur treating newers W.P. Virilyer

DIVISION OF CORPORATION 97 MAR 26 PH 3: 36 RECEIVED

CHARTER NO.	f970000 17839
DATE FILED	2/25/97

## STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT

Pursuant to the provisions of Sections 607.0501 and 607.0502, or 607.1508, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office and registered agent in the State of Florida.

- 1. The name of the corporation is: THE LIGHTING TECHNOLOGY GROUP, INC.
- 2. The name and address of its present registered agencies T CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FLORIDA 32301
- 3. The name and street address to which its registered agent is to be changed is:
  ALBERT W. OLSON
  4657 TAHITI DRIVE
  BONITA SPRINGS FL 34134
- 4. The street address of its registered office and the street address of the business office of its registered agent, as changed, are identical.
- 5. Such change was authorized by resolution duly adopted by its board of directors or by an office of the corporation so authorized by the board of directors.

ALBERT W. OLSON Signature CM W. Omm
President

Date 3-17-97

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 STATUES 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 UNDER SECTION 607.0505, FLORIDA STATUTES.

ALBERT W.			•	
Signature_	Cert	Wi	Oom	
Date	3-17-99	7		