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PORATION NAME(S) & DOCUMEN	T NUMBER(S), (if known):
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NEW FILINGS	AMENDMENTS
Profit	Amendment
NonProfit	Resignation of R.A., Officer/Direct
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Метдет

OTHER FILINGS
Annual Report
Fictitious Name
Name Reservation

響	REGISTRATION/ QUALIFICATION
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

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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. 1a. The name of the corporation is: NEVCO SYSTEMS 1b. The mailing address of the corporation is: 305 FIFTH AVENUE South SUITE 202 NAPLES FL 34102 1c. Date of incorporation: APRIL 17, 1997 __ Document number: <u>P970000 34695</u> The name and address of the current registered agent and office: CORPORATE SERVICE COMPANY TALLAHASSEE, FL 3. The name and address of the new registered agent and office:(P.O. Box Not Acceptable) J. ROBERT GROSSENBACHER 305 FIFTH AVENUE SOUTH SUITE 202 NAPLES, FL 34102 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 SEPTENBER 9. (Signature of an officer, chairman or vice chairman of the board) (Data) , Robert GROSSENBACHER (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) If signing on behalf of an entity: I, ROBERT GROSSENBACHER (Typed or Printed Name)

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

FILING FEE: \$35,00

CR2E045(11/94)