7000035622

ACCOUNT NO. : 072100000032

REFERENCE 496834

4329904

COST LIMIT : \$ 87.50

ORDER DATE: August 14, 1997

ORDER TIME: 10:39 AM

ORDER NO. : 496834

4329904 CUSTOMER NO:

CUSTOMER: Ms. Heather G. Ellis

Broad And Cassel

Suite 300

7777 Glades Road Boca Raton, FL 33434

CHANGE OF AGENT

NAME:

ALL-COUNTY PRESSURE CLEANERS

AND RESURFACING, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Daniel W Leggett

200002267192--7

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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: ALL-COUNTY PRESSURE CLEANERS AND RESURFACING, INC. 1b. The mailing address of the corporation is: 537 N.W. 45th Court Ft. Lauderdale, Florida 33309 1c. Date of incorporation: April 21, 1997 Document number: P97-000035622 2. The name and address of the current registered agent and office: Joseph A. Collora 537 N.W. 45th Court Ft. Lauderdale, Florida 33309 3. The name and address of the new registered agent and office:(P.O. Box Not Acceptante) Hal M. Dennelo 2303 S.E. 14th Street Pompano Beach, Florida 33062 The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical. its board of directors or by an officer Such change was authorized by resolution duly adopted by so authorized by the board. (Signature of an officer, chairman or vice chairman of the board) Hal M. Dennelo / 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. By: Signature of Registered Agent If signing on behalf on an entity:

(Typed or Printed Name)

(Capacity)