

# P97000065401

Requestor's Name

Address

900002361779--9  
-12/03/97--01037--003  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

WEST PLAN SERVICES INC  
10800 N. MILITARY TRAIL STE 232  
PALM BEACH GARDENS, FL. 33410

Office Use Only

(if known):

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

☐ Walk in

☐ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

| NEW FILINGS              |                   |
|--------------------------|-------------------|
| <input type="checkbox"/> | Profit            |
| <input type="checkbox"/> | NonProfit         |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication     |
| <input type="checkbox"/> | Other             |

| AMENDMENTS                          |  |
|-------------------------------------|--|
| <input type="checkbox"/>            | Amendment                              |
| <input type="checkbox"/>            | Resignation of R.A., Officer/ Director |
| <input checked="" type="checkbox"/> | Change of Registered Agent             |
| <input type="checkbox"/>            | Dissolution/Withdrawal                 |
| <input type="checkbox"/>            | Merger                                 |

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/<br>QUALIFICATION |                     |
|--------------------------------|---------------------|
| <input type="checkbox"/>       | Foreign             |
| <input type="checkbox"/>       | Limited Partnership |
| <input type="checkbox"/>       | Reinstatement       |
| <input type="checkbox"/>       | Trademark           |
| <input type="checkbox"/>       | Other               |

FILED  
97 DEC 23 AM 11:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Examiner's Initials

*[Signature]*  
12/23



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

December 9, 1997

WEAT PALM SERVICES, INC.  
10800 N. MILITARY TRAIL  
SUITE 232  
PALM BEACH GARDENS, FL 33410

SUBJECT: WEST PALM SERVICES, INC.  
Ref. Number: P97000065401

We have received your document for WEST PALM SERVICES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6908.

Teresa Brown  
Corporate Specialist

Letter Number: 497A00057972

\*\*\* FILING FEE: \$35.00 \*\*\*

**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 \_\_\_\_\_ submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: WEST PALM SERVICES, INC.

2. The mailing address of the corporation is: 2338 IMMOKALEE ROAD  
10800 N. MILITARY TRAIL  
STR 101 NAPLES FL 34110  
STE. 232 PALM BEACH GARDENS FL 33410

3. Date of incorporation/qualification: 7.29.1997 Document number: PA7000065401

4. The name and address of the current registered agent and office:

RAPID USA VISAS, INC.  
D.K. HULME, USA BUSINESS HOLDINGS  
2338 IMMOKALEE ROAD SUITE 101  
11983 TAMiami TRAIL N. SUITE 100  
NAPLES FL 34110  
NAPLES FL 34110

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

DOUGLAS FRAYNE  
10800 N. MILITARY TRAIL SUITE 232.  
PALM BEACH GARDENS FL 33410

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.

Douglas Frayne (Chairman)  
(Signature of an officer, chairman or vice chairman of the board)

9.24.97  
(Date)

DOUGLAS FRAYNE CHAIRMAN  
(Printed or typed name and title)

(Date)

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.

Douglas Frayne  
(Signature of Registered Agent)

9.24.97  
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)