4720 A GALNES City/State	$\frac{40 \text{ ME Supply}}{\text{equestor's Name}}$ $\frac{10 \text{ BM SH}}{\text{Address}}$ $\frac{11 \text{ C}}{\text{Zip}} \frac{17 \text{ BM SH}}{\text{Phone #}}$	89490 Office Use Only
CORPORATION	NAME(S) & DOCUMENT NUI	MBER(S), (if known):
2(Corp 3(Corp 4	poration Name) (D	Occument #) OCCOD2442590-2 -02/27/98-01060-002 ******70.00 ******70.00 ******35.00
U Walk in	Pick up time	
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		Certificate of Status
NEW FILINGS	AMENDMENTS	
Profit	Amendment	TALE 98
NonProfit	Resignation of R.A., Officer/Direc	98 FEB 27 SECRETAR SECRETAR
Limited Liability	Change of Registered Agent	ASS 7
Other	Dissolution/Withdrawal	
	Merger	ELOF M T
OTHER FILINGS Annual Report	REGISTRATION/ QUALIFICATION	ATE A
Fictitious Name	Foreign	
Name Reservation	Limited Partnership	Pohn
·	Reinstatement	
	Trademark	'APZ
	Other	5

Examiner's Initials

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 <u>Florida</u> 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: SOUTHEAST SUPPORT SERVICES, INC.

2. The mailing address of the corporation is: 2719 NW 74th Place, Gainesville, FL 32653

3. Date of incorporation/qualification: <u>10-16-97</u> Document number: <u>P 97000089490</u>

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

William Scott Hendrix

13836 NW 137th Place

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

Michael J. Barton

4830 NW 43rd Street Apt.#J-140

Gainesville, FL 32606

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

(Date)

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

Michael J, Barton, President (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 duities, and I am familiar with and accept the obligation of my position as registered agent.

stered Agent) ignature/o

If signing on behalf of an entity:

Michael J. Barton (Typed or Printed Name) Registered Agent (Capacity)

(Date)

CR2E045(4/95)

FILING FEE: \$35.00