## P98000001397

Document Number Only	·	
CT CORPORATION SYSTEM		
Requestor's Name 660 East Jefferson Street		98 SECF TALL/
Address Tallahassee, FL 3230	222-1092	FII SEP 2 RETAINANANASS
City State Zip	Phone	
CORPORATION(S) NAME		FLOREIT D
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() Profit () NonProfit () Limited Liability Co.	() Amendment	98 FP CH OF PH () Merger PH
() Foreign	() Dissolution/Wi	thdrawal () Mark S S S
() Limited Partnership () Reinstatement	( ) Annual Report ( ) Reservation	() Other JCC Filing Change of R.A. ( ) Fic. Name
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W.P. Verifier		9-21-98

CR2E031 (1-89)

## Florida Department of State, Jim Smith, 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 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: IMCC INTERNATIONAL, INC.
1b. Date of incorporation January 7, 1998 Document number P98000001397
2. The name and address of the current registered agent and office:
F&L CORP.  200 Laura Street, Jacksonville, Florida 32202
3. The name and address of the new registered agent and office:  (P.O. Box Not Acceptable)  C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation Florida 333
The street address of its registered agent 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.  THOMAS G. MIDDLETON, PRESIDENT
SEPTEMBER 16, 1998 (Type or printed name and title)
DATE
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 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.  C T CORPORATION SYSTEM SIGNATURE BY:  Barbara A. Burke (Registered Agent)
DATE 9-18-98
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

Filing Fee: \$35.00

(FI A - 2194 - 3/4/92)

CR2E045 (7-91)