

**CORPORATE  
ACCESS,  
INC.**

**P98000082501**

1116-D Thomasville Road . Mount Vernon Square . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

**WALK IN**

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RA change

1.) DMC Services, Inc.  
(CORPORATE NAME & DOCUMENT #)

2.) \_\_\_\_\_  
(CORPORATE NAME & DOCUMENT #)

3.) \_\_\_\_\_  
(CORPORATE NAME & DOCUMENT #)

4.) \_\_\_\_\_  
(CORPORATE NAME & DOCUMENT #)

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(CORPORATE NAME & DOCUMENT #)

10.) \_\_\_\_\_  
(CORPORATE NAME & DOCUMENT #)

**SPECIAL INSTRUCTIONS**

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**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.

1. The name of the corporation is: DMC Services, Inc.
2. The mailing address of the corporation is: 1750 Curlew Court, Rockledge, Florida 32955

3. Date of incorporation/qualification: September 23, 1998 Document number: \_\_\_\_\_

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

Michael Hahle

250 Glengarry Drive

Melborne, Florida 32940

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

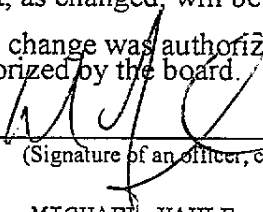
Donna Hahle

1750 Curlew Court

Rockledge, Florida 32955

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.

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


MICHAEL HAHLE, PRESIDENT

(Printed or typed name and title)

11/11/98  
(Date)

(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.

  
(Signature of Registered Agent)

11/13/98  
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)