P99000065933

Document	Number	Only
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CR2E031 (1-89)

C T CORPORATION SYST	EM			
Requestor's Name 660 East Jefferson S	treet			
Address	01 /050)222 1002	40	90003355: -08/15/000 ****210.00	9549
Tallahassee, FL 323 City State Zip	01 (850)222-1092 Phone		*****210.00	******35.80
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Document Examiner	8/14 _.		FILE STAMPED THANKS	(0)
Updater	RV I	1 Change 14-00	CONNIE BRYAN	
Verifier		14-100		
Acknowledgment	·	MZ		
W.P. Verifier				-

Florida Department of State, Jim Smith, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

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: Orius Corp.
1b. Date of incorporation 7/26/1999 Document number P99000065933
2. The name and address of the current registered agent and office:
American Information Services, Inc.
One SE 3rd Avenue, 28th fl., Miami, Fl. 33131
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 3332
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. SIGNATURE Typed or printed name and title Typed or printed name and title PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED ACENT AND ACCEPT TO ACT IN THIS CAPACITY. LEURTHER AGREE TO COMPLY
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 BY: CORPORATION SYSTEM SIGNATURE BY: (Registered Agent) Agentien DATE 870 (Registered Agent) Agentien DATE 870 (Registered Agent) Agentien DATE 871 (Registered Agent) Agentien SPECIAL ASSISTANT SECRETARY
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (7-91)

FILING FEE: \$35.00