Division of Corporations Public Access System

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REGISTERED AGENT CHANGE

TRUE NORTH COMMUNICATIONS INC.

| Certificate of Status | U |
|-----------------------|---------|
| Certified Copy | 0 |
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| | rsuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Floridu Statutes, this tement of change is submitted for a corporation organized under the laws of the State of Delawate | |
|----------|---|----------|
| - | in order to change its registered office or registered agent, or both, in the State of Florida. | |
| ١. | The name of the corporation: True North Communications Inc. | , |
| 2, | The principal office address: 13801 FNB Parkway, Ornaba, NE 68154 | _ |
| 3. | The mailing address (if different): | _ |
| 4. | Date of incorporation/qualification: 02/15/2001 Document number: P01000000908 | _ |
| 5. | The name and street address of the current registered agent and registered office on file with the Florida Department of State: | |
| | Corporation Service Company | |
| | 1201 Hays Street, Tallahassoc, FL 32301 | |
| | Tallahassee, FL 32301 | 28. |
| 6. | Tallahassee, FL 32301 The name and street address of the new registered agent (if changed) and for registered office FE 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 | 200 |
| | C T Corporation System | |
| | c/o C T Corporation System, 1200 South Pine Island Road | Š |
| | (P.O. Box NOT soceptable) | |
| | Plantation, Florida 33324 | |
| T) as | e street address of its registered office and the street address of the business office of its registered agent, changed will be identical. | |
| St | ch change was authorized by resolution duly adopted by its board of directors or by an officer so horized by the board, or the corporation has been notified in writing of the change. | |
| _ | Mark Eppley, Attornoy in Pact | |
| I i I j | (Printed or typed minic mille) ereby accept the appointment as registered agent and agree to act in this capacity. where agree to comply with the provisions of all stantes relative to the proper and complete performance my dunes, and I am familiar with and accept the obligation of my position as registered agent. Or, if this cument is being filed merely to reflect a change in the registered office address, I hereby confirm that the poration has been notified in writing of this change. | |
| В | C.T Corporation System | |
| If | igning on behalf of an entity: Mark S. Eppley Assistant Vice-President and Secretary | |
| _ | (Typed or Printed Name) | |
| | * * * FILING FEE: \$35.00 * * * | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2B045 (8/05)