

F04000001017

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

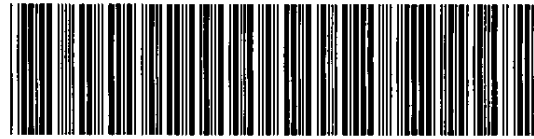
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
07 OCT 11 AM 8:45
DEPARTMENT OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

07 OCT 11 PM 1:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

R.A. Chong

C. Couffette OCT 15 2007



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 266801 7401229
AUTHORIZATION : *Spokane*
COST LIMIT : \$ 35.00

ORDER DATE : October 10, 2007
ORDER TIME : 4:10 PM
ORDER NO. : 266801-030
CUSTOMER NO: 7401229

CHANGE OF AGENT

NAME: PROTECTIVE MARKETING
ENTERPRISES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
 PLAIN STAMPED COPY

CONTACT PERSON: Kelly Courtney

EXAMINER'S INITIALS: _____

RECEIVED

07 OCT 15 PM 12:45



DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
FLORIDA DEPARTMENT OF STATE
Division of Corporations
October 11, 2007

RESUBMIT
Please give original
submission date as file date.

CSC
ATTN: KELLY
TALLAHASSEE, FL

SUBJECT: PROTECTIVE MARKETING ENTERPRISES, INC.
Ref. Number: F04000001017

We have received your document for PROTECTIVE MARKETING ENTERPRISES, INC. and the authorization to debit your account in the amount of \$. However, the document has not been filed and is being returned for the following:

This application that was submitted is for Alien business organizations. Please complete the correct application and resubmit.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 407A00059826

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, this statement of change is submitted for a corporation organized under the laws of the State of Tennessee in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Protective Marketing Enterprises, Inc.
- 2. The principal office address: 4929 West Royal Lane, Suite 200, Irving, Texas 75063
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 02/24/2004 Document number: F04000001017

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Chief Financial Officer
P.O. Box 6200 32314-6200; 200 East Gaines St.
Tallahassee, FL 32399

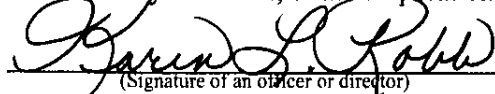
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company
1201 Hays Street
(P.O. Box NOT acceptable)
Tallahassee, FL 32301

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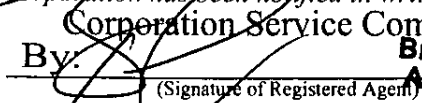
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

Karen L. Robb, Assistant Secretary
(Printed or typed name and title)

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company
By:  Brian Courtney
(Signature of Registered Agent) Asst. V. Pres.

October 10, 2007
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

*** FILING FEE: \$35.00 ***