## F94000000608

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TALLAHASSEE, FLORIE



ACCOUNT NO. : <u>-072100000032</u>

REFERENCE : \_144178 5029779

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : June 24, 2003

ORDER TIME : 12:36 PM

ORDER NO. : 144178-275

CUSTOMER NO: 5029779

CUSTOMER: Carol S. Bruser

Federated Department Stores,

7 West Seventh St.

Cincinnati, OH 45202 🗔

CHANGE OF AGENT

NAME: FACS GROUP, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Carla E. Lohi 🚤

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

Pursuant to ti	he provisions of sections 607.0502,	617.0502, 607.1508,	or 617.1508, Florida Statute:	S,
this statement	of change is submitted for a corpora	ation organized under i	the laws of the State of	
Ohio	in order to change its regis	stered office or register	red agent, or both, in the Stat	te
of Florida.			د	
-	of the corporation: FACS GROUP, INC.	-	75 3	
2. The princip	al office address: 4705 Duke Drive,	Macon OH 45040		_
z. The princip	al Office address. 4705 bake blive,	Mason, On 43040	SE S	_
3. The mailing	g address (if different): c/o Federate	d Corporate Services	s, Inc., 7 West Seventh	<u>ر</u> ع
Street, C	Cincinnati, OH 45202	<u> </u>	95	سيد
4. Date of inco	orporation/qualification: February 8	, 1994 Documen	t number: F9400000608	
	nd street address of the current regist partment of State:	tered agent and register	red office on file with the	
	CT Corporation System	-·		
	1200 South Pine Island Road			
	Plantation, FL 33324			
6. The name a changed):	and street address of the new regist	tered agent (if changed	d) and /or registered office (i	if
	Corporation Service Company			
	1201 Hays Street (P.O. Box or personal n	nailbox NOT acceptable)		
	Tallahassee, FL 32301			
The street add agent, as chan	ress of its registered office and the s ged will be identical.	streef address of the bu	isiness office of its registered	l
Such change vauthorized by	was authorized by resolution duly ad the board, or the corporation has be	lopted by its board of one of the control of the co	directors or by an officer so of the change.	
Signature of an office	er, chairman or vice chairman of the board)	Laura R. Dunlap, (Printed or type	Attorney in Fact	
I hereby accer	of the appointment as registered age to comply with the provisions of all the corporations of the corporation of the corporation of the corporation of the corporation of the provision of the	ent and agree to get in	this canacity	
=	(Signature of Registered Agent)	<u></u>	ate)	
If signing on beha	alf of an entity:	=	<del>-</del> .	
Carla Lohi	(Typed or Printed Name)	Assistant Vice Pre	esident	

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