## F94000000978

| (Requestor's Name)   |
|--|
|  |
| (Address)  |
|  |
| (Address)  |
|  |
| (City/State/Zip/Phone #)   |
| PICK-UP WAIT MAIL  |
|  |
| (Business Entity Name)   |
|  |
| (Document Number)  |
|  |
| Certified Copies Certificates of Status  |
| المستوات المستوانية والمستوانية والمستواني |
| Special Instructions to Filing Officer:  |
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Office Use Only



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ONUSHA VASSEE, FLORIO

RECEIVED

R.A. Chore

C. Coultiette OCT 3 1 2007



| ACCOUNT NO. : 072100000032  |
|---|
| REFERENCE : 291965 5149032  |
| AUTHORIZATION : ALBERTA   |
| COST LIMIT : \$35.00  |
| ORDER DATE: October 26, 2007  |
| ORDER TIME : 10:19 AM   |
| ORDER NO. : 291965-230  |
| CUSTOMER NO: 5149032  |
|   |
| CHANGE OF AGENT   |
| NAME: RPS MANAGEMENT COMPANY, INC.  |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:  CERTIFIED COPY XX PLAIN STAMPED COPY |
| CONTACT PERSON: Heather Chapman   |
| EXAMINER'S INITIALS:  |

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

| statement of cha   | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this can be provided in the submitted for a corporation organized under the laws of the State of  |
|--|---|
| 1. The name of   | the corporation: RPS MANAGEMENT COMPANY, INC.   |
| 2. The principal   | office address: 818 W. Brooks Avenue, North Las Vegas, NV 89030   |
| 3. The mailing a   | address (if different):   |
| 4. Date of incorp  | poration/qualification: February 28, 1994 Document number: F94000000978   |
|  | d street address of the current registered agent and registered office on file with the rtment of State:  |
|  | Paula Putnam  |
|  | 612 NW 2nd Street   |
|  | Ocala, FL 34475   |
| 6. The name and (if changed):  | d street address of the new registered agent (if changed) and /or registered office   |
|  | Corporation Service Company   |
|  | 1201 Hays Street  |
|  | (P.O. Box NOT acceptable)   |
|  | Tallahassee, FL 32301   |
| The street address changed will  | ess of its registered office and the street address of the business office of its registered agent, be identical.   |
| Such change was<br>authorized by th  | as authorized by resolution duly adopted by its board of directors or by an officer so<br>he board, or the corporation has been notified in writing of the change.  |
| / BUWW   | une often officer or director) Sumantha Antone, ABSI. Sect  |
| I hereby accept<br>I further agree to<br>of my duties, an<br>document is bei-<br>corporation has | the appointment as registered agent and agree to act in this capacity.  to comply with the provisions of all statutes relative to the proper and complete performance ad I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change. |
| Corporation  | Service Company   |
| / (Sig   | gnature of Registered Agent) (Date)   |
| If signing on be   | chalf of an entity:   |
|  | Asst. Vice President  Typed or Printed Name)  |
| ="   |   |

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

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