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| (Re | questor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL MAIL |
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| Certified Copies | _ Certificate: | s of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

| TO: | Amendment Section Division of Corporations |
|---------|--|
| SUBJ | ECT: TECHNOLOGY PLUS OF KANSAS, INC. (Name of Corporation) |
| DOCU | JMENT NUMBER: F98000000033 |
| The er | closed Statement of Change of Registered Office/Agent and fee are submitted for filing. |
| Please | return all correspondence concerning this matter to the following: |
| | Delanie Case |
| | (Name of Contact Person) |
| | Capitol Corporate Services Registered Agent Department (Firm/Company) |
| | 800 Brazos, Suite 1100 (Address) |
| | Austin, Texas 78701 (City/State and Zip Code) |
| For fur | ther information concerning this matter, please call: |
| Delan | ie Case at (800) 345-4647 (Name of Contact Person) (Area Code & Daytime Telephone Number) |
| Enclos | ed is a \$35,00 check made payable to the Department of State. |
| | Mailing Address: Amendment SectionStreet Address: Amendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301 |

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 Kansas in order to change its registered office or registered agent, or both, in the State of Florida. |
|---|
| 1. The name of the corporation: TECHNOLOGY PLUS OF KANSAS, INC. |
| 2. The principal office address: 4955A NE Goodview Circle |
| Lee's Summit, MO 64064 |
| 3. The mailing address (if different): |
| 4. Date of incorporation/qualification: 1/2/98 Document number: F98000000033 |
| 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 |
| Tallahasse, FL 32301 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| Capitol Corporate Services, Inc. |
| 1333 North Duval St. |
| (P.O. Box NOT acceptable) |
| Tallahassee, FL 32303 |
| 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 olicer or director) Rich Bronson, President (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. |
| Delanie Case 12-1-05. |
| (Signature of Registered Agent) (Date) |

If signing on behalf of an entity:

<u>Delante Case, Assistant Secretary on behalf of Capitol Corporate Services, Inc.</u>
(Typed or Printed Name)

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