809097

(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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04/03/03--01026--003 **35.00

03 APR -3 AM 8:26

Rtchg
DRC 4-10

PREMIER CORPORATE SERVICES, INC.

208 South LaSalle Street, Suite 1855
Chicago, IL 60604
(312) 346-3606 (800) 934-2556
Fax: (312) 346-3607

April 2, 2003 *VIA REGULAR MAIL*

Division Of Corporations
Florida Department Of State
409 E. Gaines Street
Tallahassee, FL 32399

RE: Directory Distributing Associates, Inc.

Dear Sir or Madam:

Enclosed please find one original and one photocopy of the form to change the registered agent/office for the above captioned in your state. Also enclosed is a check for the required fee.

Please file with your office and return evidence to my attention at the letterhead address.

If you have any questions, please contact me on our toll-free line at 800-934-2556, prior to returning the documents.

Thank you.

Sincerely,

Tony Alexander

TA/smc.
Encl.

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 Missouri *in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: Directory Distributing Associates, Inc.

2. The principal office address: 160 Corporate Woods Court, St. Louis, Missouri 63044

3. The mailing address (if different): P.O. Box 10066, St. Louis, Missouri 63145-0066

4. Date of incorporation/qualification: November 19, 1982 Document number: 809097

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

C T Corporation System

1200 South Pine Island Road

Plantation, Florida 33324

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

NRAI Services, Inc.

526 E. Park Avenue
(P.O. Box or personal mailbox **NOT** acceptable)

Tallahasse, Florida 32301

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 b its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Michael L Shelton — Michael L. Shelton, Vice President
(Signature of an officer, chairman or vice chairman of the board) (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.

(Signature of Registered Agent) — March 27, 2003 (Date)

If signing on behalf of an entity:

Anthony J. Alexander (Typed or Printed Name) — Asst. Secretary (Capacity)

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

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