

Mar. 16, 2011, 3:49PM
Division of Corporations

Paranet Legal

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F00000003689

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : PARANET CORPORATION SERVICES, INC.
Account Number : I20090000069
Phone : (800) 277-9977
Fax Number : (800) 815-0477

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: ARIVERA@PARANETLEGAL.COM

REGISTERED AGENT CHANGE
NICUSA, INC,

Certificate of Status	0
Certified Copy	0
Page Count	01 2
Estimated Charge	\$35.00

RECEIVED

11 MAR 16 AM 9:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NICUSA, Inc.
Name of Corporation

DOCUMENT NUMBER: F00000003689

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Eileen Chaddock
Name of Contact Person

Paranet Corporation Services, Inc.
Firm/Company

3675 Crestwood Pkwy, Suite 350
Address

Duluth, GA 30096
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eileen Chaddock at (800) 277-9977
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: NICUSA, Inc.
2. The principal office address: 25501 W. Valley Parkway, Suite 300
Olathe, KS 66061
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 6/29/2000 Document number: F00000003689

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

C T Corporation System

1200 South Pine Island Road

Plantation, FL 33324

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

NRAI Services, Inc.

515 East Park Avenue

P.O. Box NOT acceptable

Tallahassee, FL 32301

FILED
11 MAR 16 AM 9:25
TALLAHASSEE, FLORIDA

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.

William F. Bradley, Jr.
Signature of an officer or director

William F. Bradley, Jr., 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.

NRAI Services, Inc.

by: Eileen Chaddock
Signature of Registered Agent

3/3/2011

Date

If signing on behalf of an entity:

Eileen Chaddock

Typed or Printed Name

Special Asst. Secretary

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

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

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