F00000007235

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FILING REQUEST

December 15, 2004

FLORIDA SECRETARY OF STATE

Type of Filing:

CHANGE OF AGENT

Subject(s):

CYBRCOLLECT, INC.

Form(s) Enclosed:

STATEMENT OF CHANGE OF REGISTERED AGENT

Supporting Document(s):

NONE

Check Enclosed:

CHECK #17711 FOR \$35.00

Return Via:

REGULAR MAIL

Filing Method:

ASAP

PLEASE RETURN TO:

PREMIER CORPORATE SERVICES, INC.

590 PARK STREET, SUITE 6

ST. PAUL, MN 55103

Please call me at 1-800-227-1256 if there are any questions.

Thank you!

Sue Brodtmann

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

Pursuant to the	provisions of sections 607.0502, 617.0502	2, 607.1508, or 617.1508, Florida Statutes, ti	his statement of
change is submitted for a corporation organized under the laws of the State of Wisconsin			in order
to change its reg	gistered office or registered agent, or both	ı, in the State of Florida.	
1. The name of	the corporation: CybrCollect, Inc.		
2. The principal	office address: 2350 South Avenue, Su	ite 105, La Crosse, WI 54601	
			75
3. The mailing a	ddress (if different): PO Box 1145, La (Crosse, WI 54602-1145	
			77
4. Date of incorp	poration/qualification: 12/26/2000	Document number: F00000007235	
	I street address of the current registered ag tment of State:	gent and registered office on file with the	,
	CT Corporation System		
	1200 S. Pine Island Road		
	Plantation, FL 33324		
6. The name and (if changed):	I street address of the new registered agen	t (if changed) and /or registered office	
	NRAI Services, Inc.		
	526 E. Park Avenue		
	(P.O. Box or personal re	nailbox NOT acceptable)	
	Tallahassee, FL 32301		
The street addre	ess of its registered office and the street identical.	address of the business office of its register	ed agent, as
Such change wa	as authorized by resolution duly adopted e corporation has been notified in writin	by its board of directors or by an officer so of the change.	o authorized by
	Signature of an officer of director)	Gary Doherty, President (Printed or typed name and tit	le)
I hereby accept I further agree duties, and I an being filed mere	the appointment as registered agent and to comply with the provisions of all state familiar with and accept the obligation ely to reflect a change in the registered writing of this change.	,	•
If signing on be	chalf of an entity:	(Date)	
Sue Brodtman	.n	Asst. Secretary	
	(Typed or Printed Name)	(Capacity)	

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