

F01000000000664

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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(Business Entity Name)

(Document Number)

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change

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02 DEC -2 AM 10:54
DIVISION OF CORPORATION

FILED
02 DEC -2 4:00
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

ACCOUNT FILING COVER SHEET

ACCOUNT NUMBER: FCA000000005

REFERENCE: 2036784
(Sub Account)

DATE: 12/2

REQUESTOR NAME: Lexis Document Services

ADDRESS:

TELEPHONE: () () ext ()

CONTACT NAME:

CORPORATION NAME: Megaplex Nine, Inc.

DOCUMENT NUMBER:
(if applicable)

AUTHORIZATION:

Cynthia J. Woodyard

Chg. F.A.
35.00

☒ CERTIFIED COPY (1-9)
☒ CERTIFICATE OF STATUS (1-9)
☒ PLAIN STAMPED COPY

() Call When Ready	() Call if Problem	() After 4:00
() Walk In	() Will Wait	() Pick Up
() Mail Out		

**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: Megaplex Nine, Inc.
2. The principal office address: 30 Pershing Road, Suite 201
Kansas City, MO 64108
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 2/2/2001 Document number: F01000000664

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

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):

LexisNexis Document Solutions Inc.

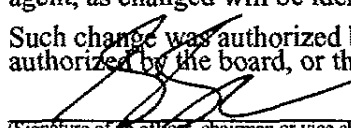
3953 W.W. Kelley Road

(P.O. Box or personal mailbox NOT acceptable)

Tallahassee, FL 32331

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 officer, chairman or vice chairman of the board)

Gregory R. Silvers
(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)

11-26-02
(Date)

If signing on behalf of an entity:

Teresa Ferrentino
(Typed or Printed Name)

Asst Sec.
(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

FILED
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TALLAHASSEE, FLORIDA
SECRETARY OF STATE