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C. Coulliste OCT 0 8 2003



ACCOUNT NO. : 072100000032

REFERENCE : 269866

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE: October 6, 2003

ORDER TIME: 9:50 AM

ORDER NO. : 269866-030

CUSTOMER NO: 7269114

CUSTOMER: Ms Michele A. Zarinelli

West Corporation

11808 Miracle Hills Drive

Omaha, NE 68154

CHANGE OF AGENT

NAME: INVIEW, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX_____ PLAIN STAMPED COPY

CONTACT PERSON: Ellyn Herndon

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

	ne provisions of sections 607.0502, 6		and the same of th
this statement	of change is submitted for a corporat	ion organized under the laws of the	द्यावीर भू
Delaware		ered office or registered agent, or b	
of Florida.			製工品
1. The name o	f the corporation: INVIEW, INC.	<u> </u>	0 1
2. The principa	al office address: 3302 20th Avenue	· · · · · · · · · · · · · · · · · · ·	
	Valley, AL 36854		53
3. The mailing	address (if different):		
4. Date of inco	orporation/qualification: March 28, 2	Document number: F01	000001689
	nd street address of the current registe partment of State:	ered agent and registered office on fi	le with the
	CT Corporation System		_
	1200 South Pine Island Road		·
	Plantation, FL 33324		
6. The name changed):	and street address of the new registe	ered agent (if changed) and /or reg	istered office (if
	Corporation Service Company		<u>.</u>
	1201 Hays Street (P.O. Box or personal m	nailbox NOT acceptable)	<u>_</u> +
	Tallahassee, FL 32301		<u>-</u>
The street add	lress of its registered office and the s aged will be identical.	treet address of the business office	of its registered
Such change authorized by	was authorized by resolution duly ad the board, or the corporation has be	opted by its board of directors or by en notified in writing of the change	y an officer so
	der, chairman or vice chairman of the board)	Paul M. Mendlik, Chief Fina (Printed or typed name and title)	······································
I further agre performance registered ago office address	pt the appointment as registered age e to comply with the provisions of al of my duties, and I am familiar with ent. Or, if this document is being files, I hereby confirm that the corporations of Registered Agent)	I statutes relative to the proper and and accept the obligation of my posed merely to reflect a change in the ion has been notified in writing of the state of th	sition as registered
If signing on bel		• •	
Marva L. Wil	- •	Assistant Vice President	.
	(Typed or Printed Name)	(Capacity)	

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