

F020000001140

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

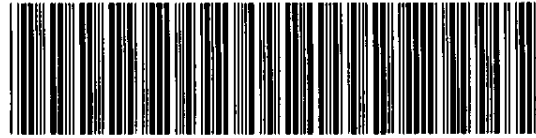
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000138320680

RD
Change

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2009 JAN 13 PM 1:42
NOT FILED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED
2009 JAN 13 PM 4:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RD
11/3/09



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 847633 5029028

AUTHORIZATION :

[Handwritten signature]

COST LIMIT : \$ 35.00

ORDER DATE : January 5, 2009

ORDER TIME : 12:33 PM

ORDER NO. : 847633-009

CUSTOMER NO: 5029028

CHANGE OF AGENT

NAME: CTM GROUP, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Doreen Wallace

EXAMINER'S INITIALS: _____

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

1. The name of the corporation: CTM GROUP, INC.
2. The principal office address: 245C North Broadway, Suite 207, Salem, NH 03079
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 03/04/2002 Document number: F02000001140
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

NRAI Services, Inc.

2731 Executive Park Drive, Suite 4

Weston, FL 33331

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

Corporation Service Company

1201 Hays Street

(P.O. Box NOT acceptable)

Tallahassee, FL 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 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.

Maureen Cullen Maureen Cullen, Attorney In Fact
(Signature of an officer or director) (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.

Corporation Service Company

By: [Signature]
(Signature of Registered Agent)

1-8-09
(Date)

If signing on behalf of an entity:

Sylvia Queppet, Asst. Vice President

(Typed or Printed Name)

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

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

CR2E045 (8/05)

FILED
2009 JAN 13 PM 4:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA