F0200002188

(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:						
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Office Use Only



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My RA Change

TRANSMITTAL LETTER

Division of Corporations
SUBJECT: RELCO CORP.
(Name of corporation)
DOCUMENT NUMBER: F02000002188
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:
Suzanne Cryan
(Name of person)
Bay State Corporate Services, Inc.
(Name of firm/company)
C. Paragraph Chr. 405
6 Beacon Street, Ste 425 (Address)
Boston, MA 02108
(City/state and zip code)
For further information concerning this matter, please call:
Suzanne Cryan at (617) 742-8484
Suzanne Cryan at (617) 742-8484 (Name of person) (Area code & daytime telephone number
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Street Address:
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of Corporations
P.O. Box 6327 409 E. Gaines Street Tallahassee FL 32314 Tallahassee FL 32399
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

•	provisions of sections 607.0502, 617.(tted for a corporation organized unde	0502, 607.1508, or 617.1508, Florida Statutes, the laws of the State of $_ ext{Iowa}$	his statement of in order
to change its reg	sistered office or registered agent, or i	both, in the State of Florida.	
1. The name of t	he corporation: RELCO CORP.		
2. The principal	office address: 10600 MASTIN		<u></u>
OVERLANI) PARK, KS 66212		
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 5/2/2002	Document number: F02000002188	
	street address of the current registere tment of State:	ed agent and registered office on file with the	A G
	CORPORATION SERVICE COM	PANY	A F
	1201 HAYS STREET		HAS:
	TALLAHASSEE, FL 32301-2525		SEE T
6. The name and (if changed):	street address of the new registered a	agent (if changed) and /or registered office	05 MAR -7 PH 3: 54 ALLAHASSEE, FLORIDA
	NRAI Services, Inc.		
	2731 Executive Park Drive, Sui	te 4	_
	(P.O. Box or perso	onal mailbox NOT acceptable)	•
	Weston, FL 33331		•
The street addre	ess of its registered office and the stridentical.	eet address of the business office of its register	red agent, as
Such change wa the board, or the	ns authorized by resolution duly ado e corporation has been notified in wi	pted by its board of directors or by an officer s riting of the change.	o authorized by
Daniel	ignature of an officer or director)	Daniel Richardson, CFO (Printed or typed name and to	fle)
I further agree i duties, and I an being filed mere been notified in	i familiar with and accept the obliga- ely to reflect a change in the register writing of this change.	t and agree to act in this capacity. statutes relative to the proper and complete pe ation of my position as registered agent. Or, if red office address, I hereby confirm that the co	tnis aocument is
NRAI Services	anno (February 9, 2005	
	(Signature of Registered Agent)	(Date)	
If signing on be	half of an entity!		
Suzanne T. Cr		Assistant Secretary	
	(Typed or Printed Name)	(Capacity)	

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