F03000001290

(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



900210910059

TO ACKNOWLEDGE BUFFIGHENCY OF FILING BILL AUG 26 AN ID 30

C.COULLIETTE

AUG 26 2011

EXAMINER

THE AUG 26 AM II: 0.



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE : 892624

7847419

AUTHORIZATION :

COST LIMIT : \$ 35%

ORDER DATE: August 25, 2011

ORDER TIME : 9:40 AM

ORDER NO. : 892624-005

CUSTOMER NO: 7847419

CHANGE OF AGENT

NAME: INFO DIRECTIONS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce

EXAMINER'S INITIALS:

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

statement of ch	ange is submitted for a corporation organ	12, 607.1508, or 617.1508, Florida Statutes, the sized under the laws of the State of $\frac{New\ Yo}{}$ ered agent, or both, in the State of Florida.		_
1. The name of	the corporation: INFO DIRECTIONS	, INC.		
2. The principal				
4. Date of incorporation/qualification: 03/13/2003 Document number: F030000			0	
	d street address of the current registered a rtment of State:	gent and registered office on file with the		
	NRAI Services, Inc.			
	515 E. Park Avenue		نھس	ن ≤ض
	Tallahassee, FL 32301		AU	SIOK FORE
6. The name and (if changed):	d street address of the new registered ager		AUG 26 AM II: 0	TARY OF STA
	Corporation Service Company	<u>/</u>	1:0:	RATI
	1201 Hays Street (P.O. Box NOT acceptable)		-	<u> </u>
	Tallahassee, FL 32301			
The street address changed will	ess of its registered office and the street l be identical.	address of the business office of its registere	ed ager	ıt,
Such change wathorized by the	as authorized by resolution duly adopted he board, or the corporation has been no	d by its board of directors or by an officer so tified in writing of the change.)	
Maure	4-1-00-9	Maureen Cathell, Vice President		_
I hereby accept I further agree of my duties, ar document is be corporation ha	ure of an officer or director) If the appointment as registered agent an Ito comply with the provisions of all stat It am familiar with and accept the obling filed merely to reflect a change in the It is been notified in writing of this change It ion Service Company	(Printed or typed name and title) Id agree to act in this capacity. Utes relative to the proper and complete perj Utes relative to the proper and complete perj Utes registered agent. (Utes registered office address, I hereby confirm Utes registered office address, I hereby confirm Utes registered office address.	forman Or, if th that th	ice his he
Sugar	tion service company	August 25, 2011	· · · · · · · · · · · · · · · · · · ·	_
o (Si	shalf of an antity:	(Date)		
	chalf of an entity:			
	Typed or Printed Name)			
	* * * FILING FE	EE: \$35.00 * * *		