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| PICK-UP | MAIT | MAIL |
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SECRETARY OF STATE

1/3/11



ACCOUNT NO. : I2000000195

REFERENCE : 966388

AUTHORIZATION

COST LIMIT :

ORDER DATE: November 2, 2011

ORDER TIME : 9:35 AM

ORDER NO. : 966388-007

CUSTOMER NO: 7855626

CHANGE OF AGENT

NAME: MID-STATES SERVICES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

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 organized under the laws of the State of Texas |
|---|--|
| | er to change its registered office or registered agent, or both, in the State of Florida. |
| The name of The principal | the corporation: MID-STATES SERVICES, INC. l office address: 580 N Beach Street, Fort Worth, TX 76111 |
| 3. The mailing a | address (if different): |
| 4. Date of incor | poration/qualification: 03/25/2003 Document number: F03000001465 |
| | d street address of the current registered agent and registered office on file with the rtment of State: |
| | Registered Agent Solutions, Inc. |
| | Registered Agent Solutions, Inc. 155 Office Plaza Drive, Suite A Tallahassee, FL 32301 |
| | Tallahassee, FL 32301 |
| 6. The name and (if changed): | d street address of the new registered agent (if changed) and /or registered office |
| | Corporation Service Company |
| | 1201 Hays Street |
| | (P.O. Box NOT acceptable) |
| | Tallahassee, FL 32301 |
| The street address changed will | ess of its registered office and the street address of the business office of its registered agent, be identical. |
| Such change was authorized by the | as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change. |
| \mathcal{M} | Maureen Cathell, Vice President (Printed or typed name and title) |
| I further agree of my duties, an document is bei corporation has | the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance ad I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change. |
| By: | on Service Company November 2, 2011 (Date) |
| , , | chalf of an entity: |
| | ry, Asst. Vice President Typed or Printed Name) |
| | |

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