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PREMIER CORPORATE SERVICES, INC.

200 West Adams Street, Suite 2007 Chicago, IL 60606 (312) 346-3606 (800) 934-2556

Fax: (312) 346-3607

December 15, 2006

VIA REGULAR MAIL

Division Of Corporations Florida Department Of State 409 E. Gaines Street Tallahassee, FL 32399

RE: Brooke Agency, Inc.

Dear Sir or Madam:

Enclosed please find one original and one photocopy of the form to change the registered agent/office for the above captioned in your state. Also enclosed is a check for the required fee.

Please file with your office and return evidence to my attention at the letterhead address.

If you have any questions, please contact me on our toll-free line at 800-934-2556, prior to returning the documents.

Thank you.

Sincerely,

Tony Alexander

TA/smc.

Encl.

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Kansas
in orde	er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: Brooke Agency, Inc.
2. The principal	office address: 10950 Grandview, Suite 600, Overland Park, KS 66210
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: 4/27/2004 Document number: F0400002441
5. The name and	I street address of the current registered agent and registered office on file with the tment of State:
	Gerald R. Grubba
	101 Federal Place, Suite 101
	Tarpon Springs, FL 34689
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered agent (if changed) and /or registered agent (if changed) and /or registered agent (if changed) are registered agent (if changed) and /or registered agent (if changed) are registered agent (if changed) and /or registered agent (if changed) are regist
	NRAI Services, Inc.
	2731 Executive Park Drive, Suite 4
	(P.O. Box NOT acceptable) Weston, FL 33331
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the copporation has been notified in writing of the change.
(Signatu	Shaw C. Lowell President Grand and title President
I hereby accept I further agree t 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 of all statutes relative to the proper and complete performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
Anthony J. Alexa	Induce of Registered Agent) (Date) Inder, Asst. Secretary half of an entity:
	Registered Agents, Inc. Typed or Printed Name)

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

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