## F0500001734

	questor's Name)	<del></del>			
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PICK-UP	☐ WAIT	MAIL			
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(Document Number)					
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TIAN SERVICE COMPANY		
	ACCOUNT NO.	: 07210000032
	REFERENCE	
	AUTHORIZATION	: Spullolenan
_ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	COST LIMIT	
ORDER DATE :	February 27, 200	06
ORDER TIME :	1:52 PM	
ORDER NO. :	890462-045	
CUSTOMER NO:	7517884	
	·	
	CHANGE OF A	AGENT
NAME:	ENESCO GROUP,	, INC.
PLEASE RETURN	THE FOLLOWING AS	S PROOF OF FILING:
XX PLAIN	STAMPED COPY	
CONTACT PERSON	: Heather Chapm	man
	EX	XAMINER'S INITIALS:

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

statement of cha	provisions of sections 607.0502, 617.0502, inge is submitted for a corporation organiz ir to change its registered office or register	ed under the laws of the State of $\_$	Illinois
1. The name of t	the corporation: ENESCO GROUP, INC.		
2. The principal	office address: 225 Windsor Drive, Itasca,	IL 60143	
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: March 18, 2005	Document number: F0500000	01734
	d street address of the current registered agortment of State:	ent and registered office on file wit	h the
	C T Corporation System		ZH 8
	1200 South Pine Island Road		智馬工
	Plantation, FL 33324		- LE
6. The name and (if changed):	d street address of the new registered agent	(if changed) and /or registered off	PR STATE
	Corporation Service Company	<u> </u>	÷ •
	1201 Hays Street		_
	(P.O. Box NOT acceptable)		
	Tallahassee, FL 32301		_
The street address changed will	ess of its registered office and the street a l be identical.	ddress of the business office of it	s registered agent,
Such change w authorized by t	as authorized by resolution duly adopted he board, or the corporation has been not	by its board of directors or by an ified in writing of the change.	officer so
YKlau	ue (ull	Maureen Cullen, Attorney in Fact	
1	aire of an officer or director)	(Printed or typed name and	
corporation nu	t the appointment as registered agent and to comply with the provisions of all statund I am familiar with and accept the obliquing filed merely to reflect a change in the seen notified in writing of this change.  In Service Company	l agree to act in this capacity, tes relative to the proper and con gation of my position as registere registered office address, I heret	nplete performance d agent. Or, if this by confirm that the
By: MUC	Service Company  Lulle Registered Agent)	February 23, 2006 (Date)	
	ehalf of an entity:		
Michelle R. Var	nnoy, Asst. Vice President		
(	Typed or Printed Name)		

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