F05000002572

(Requestor's Name)				
(Address)				
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p.A. Charle



ACCOUNT NO. : 072100000032			
REFERENCE : 671188 116167A			
AUTHORIZATION: Trucia Monte			
COST LIMIT : \$ 35.00			
ORDER DATE : October 25, 2005			
ORDER TIME : 11:16 AM			
ORDER NO. : 671188-045			
CUSTOMER NO: 116167A			
CHANGE OF AGENT			
NAME: THE FINISH LINE MAN ALIVE, INC.			
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:			
CERTIFIED COPY XX PLAIN STAMPED COPY			
CONTACT PERSON: Troy Todd			
EXAMINER'S INITIALS:			

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

statement of ch	ne provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508 hange is submitted for a corporation organized under the laws of the eder to change its registered office or registered agent, or both, in the	State of Indiana
1. The name of	of the corporation: THE FINISH LINE MAN ALIVE, INC.	
	mal office address:	
3. The mailing	g address (if different):	
4. Date of inco	orporation/qualification: 04/28/2005 Document number:	F05000002572
	and street address of the current registered agent and registered office partment of State:	on file with the
	C T Corporation System	
	1200 South Pine Island Road	
	Plantation, FL 33324	05 OC SECRE
6. The name ar (if changed):	and street address of the new registered agent (if changed) and /or reg	FILED 05 0CT 27 PM SECRETARY OF S FALLAHASSEE, FL
	Corporation Service Company	TSTA S:
	1201 Hays Street	3
	(P.O. Box NOT acceptable)	 -
	Tallahassee, FL 32301	
The street add as changed wi	dress of its registered office and the street address of the business will be identical.	office of its registered agent,
	was authorized by resolution duly adopted by its board of director the board, or the corporation has been notified in writing of the c	s or by an officer so hange.
W. Uss	Maureen Cullen,	Attorney in Fact
I fürther agree of my duties, a document is be corporation he	ept the appointment as registered agent and agree to act in this cape to comply with the provisions of all statutes relative to the propi and I am familiar with and accept the obligation of my position as being filed merely to reflect a change in the registered office address has been notified in writing of this change.	pacity. er and complete performance s registered agent. Or, if this ess, I hereby confirm that the
-	ation Service Company	1. 185
By (S	(Signaphre of Registered Agent) (D	26 / 65 ate)
If signing on b	behalf of an entity:	
Sylvia Quep	ppet, Assistant VP	
	(Typed or Printed Name)	

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