F05000002880

(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:						



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02/28/06--01028--002 **35.00

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TRANSMITTAL LETTER

· ..._

Division of Cor	porations		**	-	
SUBJECT:	(No.	RN DEMAND, I	NC.		
	(IVB	ine of corporation)			
DOCUMENT NUMBI	₹ R:	F05000002880			
The enclosed Statement	of Change of Registered O	ffice/Agent and fee	are submitted for	filing.	
Please return all corresp	ondence concerning this ma	atter to the following	g:		
	T	erry Tarwater			
	(1)	Name of person)			
	Charles Ba	clet and Associates	, Inc.		
	(Nam	e of firm/company)			
	2000 15		22		
	2030 Ma	in Street, Suite 10 (Address)	30		
		vine, CA 92614			
	(City	state and zip code)			
For further information	concerning this matter, plea	ase call:			
	Terry Tarwater	at (800)	562-6439	
(Name of person)		(Area code & day	562-6439 /time telephone numbe	r)
Enclosed is a \$35.00 ch	eck made payable to the De	epartment of State.			
Mailing Ad Amendment Division of P.O. Box 63 Tallahassee,	t Section Corporations 327	<u>.</u>	Street Address Amendment Se Division of Con 409 E. Gaines S Tallahassee, FI	porations Street	

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

Pursuant to the provisions of sections 607.05 change is submitted for a corporation organi to change its registered office or registered a	zed under the	laws of the State of	rida Statutes, th Texas	is statement of		
1. The name of the corporation: RN DEMA	ND, INC.					
2. The principal office address: 5001 States	man Drive, l	Irving, TX 75063-2414		<u> </u>		
3. The mailing address (if different):						
4. Date of incorporation/qualification:	5/9/2005	Document number:	F05000	002880		
5. The name and street address of the current Florida Department of State:	registered age	ent and registered office on fi	ile with the			
•	C T Corpo	ration System		_		
120	0 SOUTH P	INE ISLAND ROAD	-	75° 06		
	Plantatio	n, FL 33324		FEB		
6. The name and street address of the new reg (if changed):	sistered agent	(if changed) and /or registere	ed office	OS FEB 28 PM		
	NRAI Ser	vices, Inc.		ELORIE		
273′	l Executive P	ark Drive, Suite 4		DA O		
(P.O. I	Box or personal ma	ulbox NOT acceptable)		•		
_	Weston, F	FL 33331	<u></u>			
The street address of its registered office an changed will be identical.	d the street a	ddress of the business office	e of its registere	ed agent, as		
Such change was authorized by resolution of the board, or the corporation has been notified.	luly adopted ed in writing	by its board of directors or lof the change.	by an officer so	authorized by		
a And Z. Quay	Le	Jennifer L. Qı	ıayle, Assistar	it Secretary		
(Selature of an officer of director) I hereby accept the appointment as registers I further agree to comply with the provision duties, and I am familiar with and accept th being filed merely to reflect a change in the been notified in writing of this change. NRAI Services, Inc.	ed agent and s of all statut e obligation registered of					
by: \(\sigma\) \(\sigm		2/22/2006 (Date)				
f signing on behalf of an entity:			<u>.</u>			
Paul J. Hagan Assistant Secretary				ıry		
(Typed or Printed Name)	• • • • • • • • • • • • • • • • • • • •	(Canacity)				

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