F05000004179

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	WAIT MAIL	
(Business Entity Name)		
(Document Number)		
Certified Coples	Certificates of Status	
Special Instructions to Filing Officer:		

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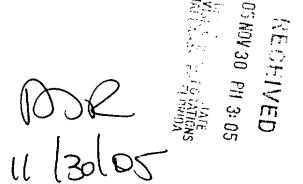
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Change

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05 NOV 30 PN 3: 46

SECRETARY OF STATE TALLAHASSEE, FLORIDA





ACCOUNT NO. : 07210000032
REFERENCE : 719720 7505911
AUTHORIZATION: O. Wallace
COST LIMIT : \$ 35.00
ORDER DATE: November 22, 2005
ORDER TIME : 1:57 PM
ORDER NO. : 719720-480
CUSTOMER NO: 7505911
CHANGE OF AGENT NAME: APAC-KANSAS, INC.
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
CONTACT PERSON: Doreen Wallace
EXAMINER'S INITIALS:

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

statement of cha	unge is submitted for a corporation	organized under the laws of the State of Delaware
	-	registered agent, or both, in the State of Florida.
1. The name of	the corporation: APAC-KANSAS,	d Vancas City, VS 66106
2. The principal	office address: 4318 Speaker Road	1, Kansas City, KS 00100
3. The mailing a	uddress (if different): P. O. Box 239	910, Overland Park, KS 66283-3910
4. Date of incorp	poration/qualification: 07/20/2005	Document number: F05000004179
	l street address of the current registment of State:	tered agent and registered office on file with the
	C T Corporation System	
	1200 South Pine Island Road	
	Plantation, FL 33324	SE SE
6. The name and (if changed):	l street address of the new registere	ed agent (if changed) and /or registered office 3
	Corporation Service Company	Fig. 2 D
	1201 Hays Street	
	(P.O. Box NOT ac	xeptable)
	Tallahassee, FL 32301	
The street addre	ess of its registered office and the be identical.	street address of the business office of its registered agent,
Such change wa	is authorized by resolution duly a ne board, or the corporation has b	dopted by its board of directors or by an officer so een notified in writing of the change.
Mai	yearliell	Maureen Cullen, Attorney in Fact
/ (Signatu	re of an officer or director)	(Printed or typed name and title)
I hereby accept I further agree t of my duties, an document is beil corporation has	the appointment as registered ag o comply with the provisions of a d I am familiar with and accept to ng filed merely to reflect a chang been notified in writing of this co	ent and agree to act in this capacity. Ill statutes relative to the proper and complete performance he obligation of my position as registered agent. Or, if this e in the registered office address, I hereby confirm that the hange.
By: Officeration	Service Company	11/16/2005
(Sig	mature of Registered Agent)	(Date)
If signing on bel	half of an entity:	
Elizabeth A. Daw	son, Asst. Vice President	
(T	yped or Printed Name)	

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