F06000003868

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(City/State/Zip/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
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C.COULLIETTE

AUG 14 2009

EXAMINER



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ACCOUNT NO. : I2000000195

REFERENCE : 091340 7715846

AUTHORIZATION : (

COST LIMIT :

ORDER DATE: August 10, 2009

ORDER TIME : 9:07 AM

ORDER NO. : 091340-030

CUSTOMER NO: 7715846

CHANGE OF AGENT

NAME: THE ENTRECOR GROUP, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Matthew Young

EXAMINER'S INITIALS:

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

statement of cha	provisions of sections 607.0502, 617.050 ange is submitted for a corporation organ er to change its registered office or regist	nized under the laws of the State of <u>low</u> s	<u>a</u>	
1. The name of	the corporation: THE ENTRECOR	GROUP, INC.		
	office address: 601 6th Ave			
	nes, IA 50309			
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 5/31/06	Document number: F0600000	3868	·
	d street address of the current registered a rtment of State:			
	CT Corporation System			
	1200 South Pine Island Road		# 60	AISIN SEC
	Plantation, FL 33324		is a	RETAF
6. The name and (if changed):	MSTON OF CORPORATION OS AUG THE PH 12: 05	34 OF 31		
	Corporation Service Company	y	05	1
	1201 Hays Street			:
	(P.O. Box NOT acceptable)		
	Tallahassee, FL 32301			
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its reg	sistered agent,	
Such change wa	as authorized by resolution duly adopte he board, or the corporation has been no	d by its board of directors or by an offic otified in writing of the change.	cer so	
Manage of the second of the se	ure of an officer or director)	Maureen Cullen, Attorney in	Fact	
I hereby accept I further agree of my duties, an document is bel corporation has	the appointment as registered agent ar to comply with the provisions of all stat of I am familiar with and accept the obl ing filed merely to reflect a change in the s been notified in writing of this change	nd agree to act in this capacity, tutes relative to the proper and complete ligation of my position as registered ago he registered office address, I hereby co	e performance ent. Or, if this infirm that the	
By: 5	tion Service Company Lua Oupput ghature of Registered Agent)	August 12, 2009		
(Si	guature of Registered Agent)	(Date)		
If signing on be	chalf of an entity:			
	opet, Assistant Vice Presider			
C	Typed or Printed Name)			

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