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SECRETARY OF STATE OF TALLAHASSEE, FLORIDA

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COVER LETTER

TO: An	mendment Section ivision of Corporations	
SUBJEC	T: Tri-State CRM, Inc. (Name of Co	rporation)
DOCUM	ENT NUMBER: F07000002202	
	sed Statement of Change of Registered Office	Agent and fee are submitted for filing.
Please ret	urn all correspondence concerning this matter	to the following:
	JJ Walsh (Name of Con	tact Person)
	Delaney Corporate Services	•
	(Firm/Co	mpany)
	823 Congress Avenue, Suite 2	
	Austin, Texas 78701 (City/State an	d Zip Code)
For furthe	er information concerning this matter, please c	all:
	JJ Walsh (Name of Contact Person)	at (512) 499.8999 (Area Code & Daytime Telephone Number)
Enclosed	is a \$35.00 check made payable to the Departs	ment of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

statement of ch	ne provisions of sections 607.0302, 617.0502, 607.1508, or 617.1508, Florida Statutes, change is submitted for a corporation organized under the laws of the State of <u>New York</u> eder to change its registered office or registered agent, or both, in the State of Florida.		
	of the corporation: Tri-State CRM, Inc.		
2. The principal	oal office address: 160 Broadway, New York, NY 10038		
3. The mailing	g address (if different):		
4. Date of incor	orporation/qualification: 04/24/2007 Document number: F070000022	02	
5. The name an	and street address of the current registered agent and registered office on file with the partment of State:		
	Corporation Service Company		
	1201 Hays Street	5	TALL
	Tallahassee, FL 32301	NO.	子
6. The name an (if changed):	and street address of the new registered agent (if changed) and /or registered office	10 NOV -3 PM 12: 48	SSEE FLORIDA
•	NRAI Services, Inc.	ا- ائ	107H
	2731 Executive Park Drive, Suite 4	.€3	<u> </u>
	(P.O. Box NOT acceptable) Weston, FL 33331		
The street addr	dress of its registered office and the street address of the business office of its regist	iered agent,	
Such change wanthorized by t	was authorized by resolution duly adopted by its board of directors or by an officer the board, or the corporation has been notified in writing of the change.	· so	
·		ident	
I hereby accep I further agree of my duties, a document is be corporation ha	ept the appointment as registered agent and agree to act in this capacity. ee to comply with the provisions of all statutes relative to the proper and complete p and I am familiar with and accept the obligation of my position as registered agen being filed merely to reflect a change in the registered office address, I hereby conf has been nonfied in writing of this change.	performance t. Or, if this irm that the	
W (S	(Signature of Registered Agent) (Date)		
If signing on b	behalf of an entity:		
LISA	(Typed or Printed Name)		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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