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CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE: 438425

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE: November 29, 2012

ORDER TIME : 10:02 AM

ORDER NO. : 438425-003

CUSTOMER NO: 7911814

## CHANGE OF AGENT

NAME: QWIZDOM, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce

EXAMINER'S INITIALS:

## $\,\cdot\,\,$ STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a corporation organ	12, 607.1508, or 617.1508, Florida Statutes, this nized under the laws of the State of Washington ered agent, or both, in the State of Florida.
1. The name of	the corporation: QWIZDOM, INC.	
2. The principa	l office address: 12617 Meridian Eas	t, Puyallup, WA 98373
3. The mailing	address (if different):	
4. Date of incor	rporation/qualification: 01/28/2008	Document number: F0800000403
	d street address of the current registered a artment of State: (If resigned, enter resigned	ngent and registered office on file with the ed)
	Business Filings Incorporated	
	515 E. Park Avenue	
	Tallahassee, FL 32301	ES ES
6. The name an (if changed):	d street address of the new registered age	nt (if changed) and /or registered office SEE FLEE
	Corporation Service Company	
	1201 Hays Street	OR THE OP
	P.O. Box NOT	Cacceptable
	Tallahassee, FL 32301	
The street addr as changed wil	ress of its registered office and the street l be identical.	address of the business office of its registered agent,
Such change w authorized by t	as authorized by resolution duly adopted he board, or the corporation has been no	by its board of directors or by an officer so tified in writing of the change.
$\Omega$	une all	Maureen Cathell, Vice President
I further agree performance of agent. Or, if th hereby confirm	ute of an officer or director  t the appointment as registered agent an to comply with the provisions of all stat f my duties, and I am familiar with and a nis document is being filed merely to refle that the corporation has been notified i on Service Company	utes relative to the proper and complete accept the obligation of my position as registered ect a change in the registered office address. I
By: 2	100 CKV)	November 28, 2012
	gnature of Registered Agent	Date
If signing on be	ehalf of an entity:	
Grace E. Kir	by, Assistant VP	
	Typed or Printed Name	F. 035 00 4 4 4
	* * * FILING FF	.e.: a 13 till " " "

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)