Department of State

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Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number

: (850)617-6380

000638. 144 740

From:

: CORPDIRECT AGENTS, INC. Account Name

Account Number: 110450000714 Phone : (850)222-1173 Fax Number : (850)224-1640

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REGISTERED AGENT CHANGE A.K.A. ADVERTISING, INC.

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Electronic Filing Menu

Corporate Filing Menu

Help

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STATEMEN	T OF CHANGE OF REGISTERED OF FOR CORPOR	fice or registere lations	D AGENT OF	вотн
	provisions of sections 607.0502, 617.0502,			
	nge is submitted for a corporation organize			SOURI
	galiz regisiered office or registered agent, i	neboth_in.the_State.of.Eloc	lda	
1. The name of t	•	OTICING INC		
		RTISING, INC.		
2. The principal				
•	4601 Madison	Kenses City	MO	64112
3. The mailing a	ddress (if different):			
4. Date of Incom	oration/qualification: 10/07/2008 Document number: F080000043		04392	
	i street address of the current registered age timent of State:	nt and registered office on t	lile with the	
	CT CORPORA	TION SYSTEM		40 5
	1200 S PINE	ISLAND RD		
	PLANTATION	FL 3	3324	至此
6. The name and (if changed):	i street address of the new registered agent		red office	SEE. FI
	Transmi desposado	resourced erail mo.		· `9
		ark Avenue		. 5
	(P.O. Bax NO	П сыхдалы ;) •		
	Taliahassee	Florida 3	2301	•
	ess of its registered office and the street as the identical.			
Such change we authorized by the	as authorized by resolution duly adopted in board, or the corporation has been noti-	oy its board of directors or fied in writing of the chan	by an officer s ge.	0
	Instru -	Sheryl Cam	nhall Ass	Istant Secretary
70	Signifying all an officer or director)	(Zdated)	or typed name and six	le)
i heraby accept i further agree of my duties, ar document is be corporation ha	the appointment as registered agent and to comply with the provisions of all statuted and accept the obligation and accept the obligating filed mejety to reflect a change in the object and the provision of this adapted to the object and the object are the object as the object of th	agree to act in this capacies relative to the proper a attentive to the proper a attent of my position as re- registered office address,	ty, nd complete per sistered agent. I hereby confin	rformonce Or, if this n that the
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	chalf of an entity:	ت.	•	
National	Corporate Research, Ltd., Inc.	•		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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