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ACCOUNT NO. : 12000000195

REFERENCE : 9042337

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE: September 7, 2011

ORDER TIME : 9:57 AM

ORDER NO. : 904233-006

CUSTOMER NO: 7848686

CHANGE OF AGENT

NAME: TOPPING OUT INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce

EXAMINER'S INITIALS:

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

statement of cha	provisions of sections 607.0502, 61 unge is submitted for a corporation er to change its registered office or t	organized under th	e laws of the State o	of Nebraska		
1. The name of	the corporation: TOPPING OUT	INC				
2. The principal	office address: 5910 South 27th	Street, Omaha N	E 68107			
3. The mailing a	address (if different):					
4. Date of incor	poration/qualification: 04/16/2009	Docum	nent number: F0900	00001568		
	d street address of the current registertment of State:	red agent and regi	stered office on file	with the		
	Corporate Creations Network, Inc.					
	11380 Prosperity Farms Road #221E					
	Palm Beach Gardens FL 3341)		2011 SEP -8 SECRETARY TALLAHASS		
6. The name and (if changed):	d street address of the new registered	agent (if changed) and /or registered	FTARY OF		
	Corporation Service Company		· · · · · · · · · · · · · · · · · · ·	_ 6 4		
	1201 Hays Street					
	(P.O. Box NOT acc	ptable)	•			
	Tallahassee, FL 32301					
The street address changed will	ess of its registered office and the sbe identical.	treet address of th	ne business office o	f its registered agent,		
Such change wa authorized by the	as authorized by resolution duly ac ne board, or the corporation has be					
May	re of an officer or director)	Maureen	Cathell, Vice Pre			
I further agree : of my duties, an document is bei corporation has	the appointment as registered age to comply with the provisions of a d I am familiar with and accept the ing filed merely to reflect a change is been notified in writing of this ch	nt and agree to a statutes relative e obligation of my in the registered ange.	ct in this capacity. to the proper and coopers and cooper and coopers and coopers and coopers. I he	complete performance ered agent. Or, if this reby confirm that the		
Ву: 🔾 (on Service Company	09/07/20	11	•		
	gnature of Registered Agent)		(Date)			
	half of an entity:		•			
	et, Asst. Vice President Typed or Printed Name)					
(,	Jiva or i minou minoj					

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