FILE REQUEST

November 25, 1997

Florida Department of State 409 E. Gaines Street Tallahassee, FL 32399



Type of Filing:

Change of Agent

Subject:

Northwest Communications, Inc.

Form(s) Enclosed:

Statement of Change of Registered Office or **Registered Agent or Both for Corporations** 

Supporting Document(s):

N/A

Check(s) Enclosed:

Check No. 6890 - \$35.00

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**ASAP** 

DEC 8 1997

Please return to:

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800-722-0708

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## Florida Department of State, Sandra B. Mortham, Secretary of State

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: <u>Northwest Communications</u>	, Inc. 9> /
1b. The mailing address of the corporation is: 27501 SW Parkwa	y Avenue, Suite 200
Wilsonville, OR 97070	5.7
	~
1c. Date of incorporation: 12-19-95 - Document num	nber: <u>F95000006176</u>
2. The name and address of the current registered agent and office	ce:
CT Corporation System	
1200 South Pine Island Raod	
Plantation, FL 33324	
3. The name and address of the new registered agent and office:(P.	O Pay Not Acceptable
	box not Acceptable/
NRAI Services, Inc.	<del></del>
526 E. Park Avenue	<del></del>
Tallahassee, FL 32301	<del></del>
The street address of its registered office and the street address registered agent, as changed, will be identical.	s of the business office of its
Such change was authorized by resolution duly adopted by its boar so authorized by the board.	d of directors or by an officer
	11-20-97
(Signature of an officer, chairman or vice chairman of the board)	(Date)
Larry L. Linenschmidt	
(Printed or typed name and title)	
Having been named as registered agent and to accept service of corporation, I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all statutes relative performance of my duties, and I am familiar with and accept the registered agent.	nd agree to actin this capacity. ve to the proper and complete
	Nov. 24, 1997
(Signature of Registered Agent) NRAI, Services	(Date)
If signing on behalf of an entity:	
(Typed or Printed Name)  Asst. Sec	c. for NRAT, <u>Services</u> (Capacity)
D: : :	FI 00044

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045(11/94)

FILING FEE: \$35.00