

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : CORPORATION SERVICE COMPANY  
Account Number : I20000000195  
Phone : (850) 521-1000  
Fax Number : (850) 558-1515

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDAREGISTERED AGENT CHANGE  
NORTH AMERICAN MONEY ORDER COMPANY, INC.

Certificate of Status	0
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Estimated Charge	\$35.00

*Rp/Rdchg*  
*@ 11/22/10*

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**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, this statement of change is submitted for a corporation organized under the laws of the State of Georgia in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: NORTH AMERICAN MONEY ORDER COMPANY, INC.
2. The principal office address: 3570 Trotter Drive, Alpharetta, GA 30004
3. The mailing address (if different): P O Box 1208, Alpharetta, GA 30009
4. Date of incorporation/qualification: 01/30/1996 Document number: F96000000497
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:  
NRAI Services, Inc.  
2731 Executive Park Drive, Suite 4  
Weston, FL 33331
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
Corporation Service Company  
1201 Hays Street  
(P.O. Box NOT acceptable)  
Tallahassee, FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]  
(Signature of an officer or director)

DAVID J. GUEST Sec/Treas.  
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company  
By: [Signature]  
(Signature of Registered Agent)

11-22-2010  
(Date)

If signing on behalf of an entity:

Grace E. Kirby, Asst. Vice President  
(Typed or Printed Name)

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

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

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