F97000000512

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(Oity/State/Zip/Filotie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
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Special Instructions to Filing Officer:

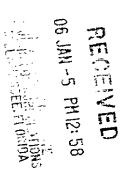
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BR/06



ON BERYICE CUMPANY
ACCOUNT NO. : 072100000032
REFERENCE : 781721 5160006
AUTHORIZATION MULTICAL
COST LIMIT \$ 35.00
ORDER DATE: December 28, 2005
ORDER TIME : 10:26 AM
ORDER NO. : 781721-750
CUSTOMER NO: 5160006
. CHANGE OF AGENT
NAME: ARVIM, INC.
MANIE: ARVIN, INC.
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
CONTACT PERSON: Troy Todd

EXAMINER'S INITIALS:

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this unge is submitted for a corporation organized under the laws of the State of California
in orde	r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: ARVIM, INC.
2. The principal	office address: 501 S. Fourth Avenue, Suite 140, Louisville, KY 40202
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: January 30, 1997 Document number: F97000000512
	d street address of the current registered agent and registered office on file with the truent of State:
	NRAI Services, Inc.
	2731 Executive Park Drive, Suite 4
	Weston, FL 33331
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered officers
	Corporation Service Company
	1201 Hays Street
	(P.O. Box NOT acceptable)
	Tallahassee, FL 32301
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change.
W. Buyun	W. Paryan Hudson General Counsel TV. (Printed or typed name and title)
I hereby accept I further agree of of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.
By: 'γ' (Service Company MULL L. UMMy Tanture of Registered Agent) January Janua
If signing on be	half of an entity:
Michelle R. Van	noy, Asst. V.P.
	vned or Printed Name)

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

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