

F970000006893

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SEC. OF STATE
TALLAHASSEE, FLORIDA

7/1/04
RAIRO Chg.
SP



200 West Adams Street, Suite 2007
Chicago, IL 60606
(312) 346-3606 (800) 934-2556
Fax: (312) 346-3607

June 16, 2004

VIA Regular mail

Division Of Corporations
Florida Department Of State
409 E. Gaines Street
Tallahassee, FL 32399

**RE: Entertainment Publications Operating Company, Inc.
Sally Foster, Inc.**

Dear Sir or Madam:

Enclosed please find one original and one photocopy of the form to change the registered agent/office for the above captioned in your state. Also enclosed is a check for the required fee.

Please file with your office and return evidence to my attention at the letterhead address.

If you have any questions, please contact me on our toll-free line at 800-934-2556, prior to returning the documents.

Thank you.

Sincerely,

A handwritten signature in black ink, appearing to read "MT", with a long, sweeping horizontal line extending to the right.

Michael A. Turano
Encl.



**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 Michigan in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Sally Foster, Inc.

2. The principal office address: 1414 E. Maple Road, Troy, MI 48083-4019

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/29/97 Document number: F97000006893

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CT Corporation System

1200 South Pine Island Drive

Plantation, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NRAI Services, Inc.

526 E. Park Avenue

(P.O. Box or personal mailbox 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 authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer, chairman or vice chairman of the board)

Camille Cleveland - Vice President

(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.


(Signature of Registered Agent)

February , 2004

(Date)

If signing on behalf of an entity:

Michael A. Turano

(Typed or Printed Name)

NRAI Services, Inc.

Assistant Secretary

(Capacity)

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

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

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