(Requestor's Name)					
(Address)					
(Address)					
(Addiess)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(======,					
(Document Number)					
Certified Copies Certificates of Status					
Chariel Instructions to Filing Officer					
Special Instructions to Filing Officer:					
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Office Use Only



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JUN 02 2016 T. Lepaielyx



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

Capitol Corporate Services, Inc.

PO Box 1831 Austin, TX 78767

Phone: 800-345-4647 Fax: 800-432-3622

regagent@capitolservices.com

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

DATE: STATE: 5/23/2016 FLORIDA

REP UNIT:

DIALECTIC, INC.

Enclosed for filing please find a Statement of Change of Registered Office or Registered Agent or Both for Corporations for the above referenced name, which is to be filed in your office. Enclosed is check #27482 in the amount of \$35.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please call 800-345-4647 and ask for the Change of Agent Section of the Registered Agent Department.

Should you need to return this document for any reason please send it to:

Capitol Corporate Services, Inc. PO Box 1831 Austin, TX 78767

COVER LETTER

Division of	of Corporations						
SUBJECT: LAI	RSON BINKLEY, INC.	Corporation					
DOCUMENT N	UMBER: F98000004499						
The enclosed Stat	ement of Change of Registered Offic	ee/Agent and fee are submitted for filing.					
	orrespondence concerning this matte						
	Myra Simmons Name of Contact Person						
Name of Contact Person							
Capitol Services Registered Agent Department							
Firm/Company							
	PO Box 1831						
	Address						
	Austin, TX 78767						
	Austin, TX 78767 City/State and Zip Code						
•	E-mail address: (to be used for future annual report notification)						
For further inform	nation concerning this matter, please	call:					
	Myra Simmons	800 >345-4647					
Na	Myra Simmons me of Contact Person	at (800) 345-4647 Area Code & Daytime Telephone Number					
Enclosed is a \$35.	.00 check made payable to the Depar	tment of State.					
	Mailing Address:	Street Address:					
	Amendment Section	Street Address: Amendment Section					
	Division of Corporations	Division of Corporations					
	P.O. Box 6327	Clifton Building					
	Tallahassee, FL 32314	2661 Executive Center Circle					
		Tallahassee, FL 32301					

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

Pursuant to the provision statement of change is su in order to chan	-	ı organized unde	r the laws of the State	of KANSAS	-
1. The name of the corpor	ration: DILECTIC, I	NC.			
2. The principal office ad- KANSAS CITY, M	dress: <u>310 W 20TH 8</u> AO 64108			•	
3. The multing address (if					
4. Date of incorporation/s	pullification: <u>8/7/199</u>		., .		
5. The name and street ad Florida Department of	dross of the current regis State: (If resigned, enter		rogistered office on file	o with the	
CTCC	ORPORATION SYS	STEM			
1200 \$	SOUTH PINE ISLA	ND ROAD			
FICANT	ATION	FL	33324		
6. The name and street ad (if changed): Capito		ed agent (II chan es, Inc.	ged) and /or registered	I office	2018 HAY 27
Tallaha	38800	FL	32301	- 湯	D . 77
The street address of its as changed will be identifully be been changed was authorized by the board.	registered office and the cal.	street address o	I the husiness office o	of its registered ago.	11:25
Signafara of an offic		G.	Pantphor your manu m	ees Seeron	any
Interest in other states of the appoint of the appo		ent and agree to ill statutes relati and accept the to reflect a char iffed in writing	equipage Types name on act in this canacity, we to the proper and o obligation of my post- age in the registered of this change.	a unu complete tion as registerad Afice address, I	
10uane	. ^	a andro a series de la constante	5.23.16		-
if signing on behalf of an	cutity:				
Delanie Case, Asst	. Secretary on behi	alf of Capitol	Corporate Service	ses, Inc.	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

* * * FILANG FEE: \$35,00 * * *