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DIVISION OF CORPORATION FIGURE FLORIDA



ACCOUNT NO. : 072100000032

REFERENCE : 267985 4388623

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE: October 3, 2003

ORDER TIME : 8:06 AM

ORDER NO. : 267985-220

CUSTOMER NO: 4388623

CUSTOMER: Benita Coleman-davis

Mail-well I Corporation

Suite 400

8310 S. Valley Highway Englewood, CO 80112

CHANGE OF AGENT

NAME: MAIL-WELL COMMERCIAL PRINTING,

INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CONTACT PERSON: Carla E. Lohi

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

	the provisions of sections 607.0302	•	-
nnis statemen. Delaware	t of change is submitted for a corpor	ration organizea unaer the laws istered office or registered agen	-
of Florida.	in Graer to change as regi	stereu office or registereu agen	i, or boin, in the state
•	of the corporation: MAIL-WELL COMME	RCIAL PRINTING, INC.	1 St. 03
	1.00		題名書
8310 S. V	/alley Highway, Suite 400, Engle	wood, CO 80112	र वे हुए
3. The mailin	g address (if different):		
			22
4. Date of inc	corporation/qualification: 02/18/1999	Document number	F99000000995
	and street address of the current regist partment of State:	stered agent and registered office	e on file with the
	C T Corporation System		
	1200 South Pine Island Road		
	Plantation, FL 33324		<u></u>
6. The name changed):	and street address of the new regis	stered agent (if changed) and /o	or registered office (if
- ,	Corporation Service Company		····
	1201 Hays Street (P.O. Box or personal	mailbox NOT acceptable)	· · · · · · · · · · · · · · · · · · ·
	Tallahassee, FL 32301		
The street addagent, as char	dress of its registered office and the nged will be identical.	street address of the business o	office of its registered
~ (1/)	was authorized by resolution duly a the board, or the corporation has b	dopted by its board of directors een notified in writing of the ch	or by an officer so ange.
(Signature of an offi	icer, chairman or vice chairman of the board)	Maureen Cullen, Attorney (Printed or typed name and	in Fact
I hereby acce I further agre performance registered ag office address	ept the appointment as registered ag se to comply with the provisions of a of my duties, and I am familiar with ent. Or, if this document is being fi s, I hereby confirm that the corpora	gent and agree to act in this cap all statutes relative to the prope h and accept the obligation of m iled merely to reflect a change i tion has been notified in writing	acity. r and complete ny position as n the registered g of this change.
<u>Sifu</u>	(Signature of Registered Agent)	October 1, 2003 (Date)	<u> </u>
		(Date)	
	half of an entity:	Asst. Vice President	
Sylvia Quepr	(Typed or Printed Name)	Asst. Vice President (Capacity)	

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