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US CorpWorks Inc.

23 Butler Avenue Maynard, MA 01754 www.uscorpworks.com

Phone: 888.967.5799 Fax: 978.897.5905

February 9, 2006

Via US Mail

Division of Corporations Florida Department of State 2661 Executive Center Circle West Tallahassee, FL 32301

Re: Sanborn Solutions, LLC

To Whom It May Concern:

Enclosed for filing in your office are the following document(s) along with a check covering your fees:

Change of Registered Agent

Please call the toll-free number listed above if for any reason, the filing(s) can not be made.

Thank you for your time and consideration in this matter.

Sincerely,

Sabrina Tillapaugh

- STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: Sanborn Solutions, L	LC
2. The mailing address of the limited liability company is:	
1935 Jamboree Drive, Suite 100, Colorado Springs, CO 80920	
	·
03/03/2005 M05000	0001127
3. Date of filing/registration in Florida 4. Doc	ument number
5. The name of the registered agent and the registered office address a Florida Department of State:	as shown on the records of the
CT Corporation System	
Name	
1200 South Pine Island Road	= 1-2
Address	
Plantation, FL 33324	
City, State and Zip	200
6. The name and address of the new registered agent and/or office:	
NRAI Services, Inc.	
Name	
2731 Executive Park Drive, Suite 4	
Florida street address (P.O. Box NOT ac	ceptable)
Weston FL_33331	
City, State and Zip	
If the limited liability company is not organized under the laws of the confirmed that after the change or changes are made, the Florida street and the business office of the registered agent will be identical. Or, it liability company, it is hereby confirmed that the change(s) was/were the members of the limited liability company or as otherwise provide the operating agreement of the limited liability company.	et address of the registered office
Maura. Wild	
(Signature of a member or authorized representative of a member)	
(Printed or typed name of signee) I hereby accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree to accept the appointment as registered agent and agree agent and agree agent and agree agent agent and agree agent	t in this capacity. I further agree to
I hereby accept the appointment as registered agent and agree to accomply with the provisions of all statutes relative to the proper and cand I am familiar with and accept the obligations of my position as reChapter 608, F.S. Or, if this document is being filed to merely reflect address, I hereby confirm that the limited liability company has been NRAI Services, Inc.	omplete performance of my duties, egistered agent as provided for in t a change in the registered office notified in writing of this change.
(Signature of Registered Agent)	
Sabrina Tillapauch, Asst. Secretary Division of Corporations, P.O. Box 6327, Tallah	iassee, FL 32314

FILING FEE: \$25.00

INH\$18(10/99)