

**2009 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Sep 30, 2009  
Secretary of State**

DOCUMENT# P07000127627

Entity Name: RPS WORLDWIDE, INC.

**Current Principal Place of Business:**

**New Principal Place of Business:**

4201 VINELAND ROAD  
I - 10  
ORLANDO, FL 32811 US

**Current Mailing Address:**

**New Mailing Address:**

4201 VINELAND ROAD  
I - 10  
ORLANDO, FL 32811 US

FEI Number: 26-1475074      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

RECEIVABLE PROTECTION SERVICES, INC.  
1311 INDIANA AVENUE  
ST. CLOUD, FL 34769 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: WILLIAM T. FICKA

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: FICKA, WILLIAM T III  
Address: 4201 VINELAND RD. #I-10  
City-St-Zip: ORLANDO, FL 32811 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Delete  
Name: FICKA, WILLIAM T III  
Address: 4201 VINELAND RD. #1-10  
City-St-Zip: ORLANDO, FL 32811 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM T. FICKA

PSDT

09/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date