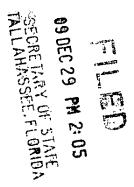
P17395

Office Use Only



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C.COULLIETTE

JAN 0 4 2010

EXAMINER

December 23, 2009

VIA US REGULAR MAIL

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Re: THOMSON INC.

Dear Sir or Madam:

On behalf of the above-referenced corporation, enclosed please find the following for filing with the Florida Secretary of State:

- 1. One original (1) and one (1) copy of Change of Registered Agent/Address form;
- 2. \$35.00 to cover the required filing fee.

Please file immediately the enclosed, and return a file-stamped copy to the undersigned.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (512) 480-9131.

Respectfully,

REGISTERED AGENT SOLUTIONS, INC.

Starisa T. Foskey

Registered Agent Solutions, Inc. 32 W. Loockerman Street Suite 201

Dover DE 19904

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

statement of cha	mge is submitted for a co	rporation organized	07.1508, or 617.1508, Flor I under the laws of the State I agent, or both, in the State	of DELAWARE		
1. The name of	the corporation: THON	ISON INC.				
			T, INDIANAPOLIS IN	46290		
3. The mailing a	address (if different):					
4. Date of incorp	poration/qualification:	12/28/1987	Document number:	P17395		
	d street address of the cur rtment of State: (If resign		t and registered office on fil	le with the		
	CT CORPORATIO	N SYSTEM				
	1200 S. PINE ISLAND ROAD					
	PLANTATION FL	33324				
6. The name and (if changed):	d street address of the new	w registered agent (i	f changed) and /or registere	ed office ALL AHI	and a	
	REGISTERED AG	ENT SOLUTION	NS, INC.	;;≥ ~ :	Gateria Frigitiss 2 Å	
	155 OFFICE PLAZ			9 P	m	
	TALLAHASSEE, F	P.O Box NOT acc	ceptable	17 17 12 12 12 12 12 12 12 12 12 12 12 12 12	remain:	
The street address changed will	ess of its registered office		dress of the business office	of its resistered agent	•	
Such change wauthorized by t	as authorized by resolut he board, or the corpora	ion duly adopted by tion has been notifi	y its board of directors or bed in writing of the change	by an officer so		
Signatu	ity of an officer of diffector		MESSAN LETIZE Printed or typed name	ET SECRETA	RY	
I hereby accept I further agree of my duties, ar document is be corporation ha	the appointment as reg to comply with the prov nd I am familiar with an ing filed merely to reflet s been notified in writin	istered agent and a isions of all statute. d accept the obliga et a change in the re g of this change.	gree to act in this capacity s relative to the proper and tion of my position as regi egistered office address, T). I complete performanc stered agent. Or, if thi hereby confirm that th	re is e	
Stay	a T. Foskey) 	12.15.09			
If cioning on he	chalf of an entity		Date			
	ehalf of an entity:					
	Foskey, Assistant Se Typed or Printed Name	ecretary				

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

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

statement of cha	nge is submitted for a co	orporation organized	107.1508, or 617.1508, Flor I under the laws of the State I agent, or both, in the State	of DELAWARE		
1. The name of t	the corporation: THON	ASON INC.				
2. The principal	office address: 101 W	103RD STREE	T, INDIANAPOLIS IN	46290		
3. The mailing a	ddress (if different):			1,000		
4. Date of incorp	poration/qualification:	12/28/1987	Document number:	P17395		
	I street address of the cur tment of State: (If resign		t and registered office on fi	le with the		
	CT CORPORATIO	N SYSTEM				
	1200 S. PINE ISLA	AND ROAD				
	PLANTATION FL	33324	-	3		
6. The name and (if changed):		•	f changed) and /or registere	DEC 29		
	REGISTERED AG		_			
	155 OFFICE PLAZA DR., SUITE A P.O. Box NOT acceptable					
	TALLAHASSEE, F	L 32301		> 		
The street addre	ess of its registered office be identical.	ce and the street add	dress of the business office	of its registered agent,		
Such change wa authorized by th	as authorized by resolut ne board, or the corpora	ion duly adopted by tion has been notifi	vits board of directors or bed in writing of the change	by an officer so		
Ne Signatur	Xofan officer of diffection		Mashaw LEthin	ET SECRETARY		
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as reg to comply with the prov d I am familiar with an ng filed merely to reflec been notified in writin	istered agent and a isions of all statutes d accept the obligat et a change in the re g of this change.	gree to act in this capacity s relative to the proper and tion of my position as regi egistered office address, Ti	d complete performance stered agent. Or, if this hereby confirm that the		
Staris	a T. Foskey	 -	12 · 15 · 09			
If signing on be	half of an entity:					
Starisa T. F	oskey, Assistant Se	cretary				

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

Typed or Printed Name