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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032 REFERENCE. 728638 7440135 Kenan AUTHORIZATION COST LIMIT : \$ 35.00 _____ _____ ORDER DATE : November 22, 2005 ORDER TIME : 9:57 AM ORDER NO. : 720638-770 CUSTOMER NO: 7440135 -----

CHANGE OF AGENT

NAME: DESIGN BENEFIT PLANS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XX
 PLAIN STAMPED COPY

CONTACT PERSON: Darlene Ward

EXAMINER'S INITIALS:

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of <u>Illinois</u> in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: DESIGN BENEFIT PLANS, INC.

2. The principal office address: 11825 N. Pennsylvania Street, Carmel, IN 46032

3. The mailing address (if different):____

4. Date of incorporation/qualification: September 7, 1988 Document number: P20776

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

C T Corporation System

1200 S. Pine Island Road

Plantation, Fl 33324

6. The name and street address of the new registered agent (if changed) and /or registered office

Corporation Service Company

1201 Hays Street

(P.O. Box NOT acceptable)

Tallahassee, FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Maureen Cullen, Attorney in Fact

(Printed or typed name and title)

(Date)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company Bulle By: (Signature of Registered Agen

December 29, 2005

If signing on behalf of an entity:

Michelle R. Vannoy, Asst. Vice President

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)