

P25880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

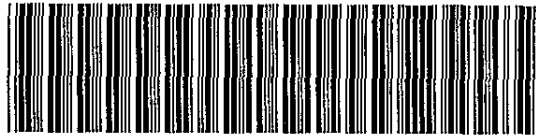
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04 NOV -5 PM 4:05
TALLAHASSEE, FLORIDA



NATIONAL SERVICE INFORMATION, INC.
www.nsii.net

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TALLAHASSEE, FLORIDA

November 2, 2004

To Whom It May Concern:

Please file the enclosed change of agent form and return a date stamped copy to my attention. I have enclosed a self address envelope for your convenience.

Should you have any questions, please do not hesitate to contact me. The number I can be reached at is 1-800-235-0337 x 118

Sincerely,

Traci Smith
Corporate Services Manager

RECEIVED
04 NOV -5 AM 9:44
OFFICE OF CORPORATE AFFAIRS



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

September 24, 2004

NATIONAL SERVICE INFORMATION, INC.
% TRACI SMITH
P.O. BOX 6293
MARION, OH 43301-6293

SUBJECT: RSC THE QUALITY MEASUREMENT COMPANY
Ref. Number: P25880

FILED
04 NOV -5 PM 4:05
TALLAHASSEE, FLORIDA

We have received your document for RSC THE QUALITY MEASUREMENT COMPANY and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 804A00056280

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RSC The Quality Measurement Company
(Name of corporation)

DOCUMENT NUMBER: P25880

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Traci Smith
(Name of person)

National Service Information, Inc.
(Name of firm/company)

145 Baker Street
(Address)

Marion, Ohio 43302
(City/state and zip code)

For further information concerning this matter, please call:

Traci Smith at (800) 235-0337 ext. 118
(Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

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TALLAHASSEE, FLORIDA

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 Ohio in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: RSC The Quality Measurement Company
2. The principal office address: 110 Walnut Street Evansville, Indiana 47708
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 08/30/1989 Document number: P25880
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 South Pine Island Road

Plantation, Florida 33324

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

NRAI Services, Inc.

526 E. Park Avenue

(P.O. Box or personal mailbox 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.

Mary Pat Trainum
(Signature of an officer or director)

MARY PAT TRAINUM SR VP
(Printed or typed name and title)

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.

NRAI Services, Inc.

by: Mari Smith

(Signature of Registered Agent)

11/1/04
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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TALLAHASSEE, FLORIDA