

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023 Phone : (850)222-1092 Fax Number

: (850)222-9428

REGISTERED AGENT CHANGE

TSRC OF FLORIDA, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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

Pursuant to the provisions of sections			Statute
the undersigned corporation organized			
submits the following statement in orde	er to change its regist	ered office or registered agent, or	both, i
the State of Plorida.	ame >1 F		
1. The name of the corporation : TSRC of	of Florida, Inc.		
	··································		
2. The mailing address of the corporation	on : 12140 Woodcrest Ex	contive Dr., Suite 300,	
St. Louis, Missouri 63141		•	
		7	
 Date of incorporation/qualification; 	December 10, 1999	_ Document number: P9900010709	
4. The name and address of the current	registered agent and o	ffice: \	53
Corporation Service Compa	ιnV	·	F
			5
1201 Hays Street			س بن
Tallahassee, FL 32301	The state of the s	N 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/	
The name and address of the new reg	ustered agent (it chang P. O. Box Not Accepta	•	ngea):
	. O. Dox 1101 Accept	inc)	
C T Corporation System			
c/c C T Corporation System	, 1200 South Pine Island	Road,	
Plantation, Florida 33324			
The street address of its registered office	ce and the street addre	ess of the business office of its ree	istered
agent, as changed, will be identical.		-	•
Such change was authorized by resolut authorized by the board.	ion duly adopted by i	is board of directors or by an offic	et so
Richar OT Yelling		6-17-03	
(Signature of an officer, chairman or vice	chairman of the board)	(Date)	—
Pictor T Va			
Printed or typed name at	od title)		
Having been named as registered agen	it and to accept servic	e of process for the above stated	
Having been named as registered agen corporation, I hereby accept the appoil I further agree to comply with the prov	ntment as registered of disjons of all stanutes	igent and agree to act in this capa Plative to the proper and complete	city.
performance of my duites, and I am far registered agent.	niliar with and accep	t the obligation of my position as	-
C Leoporation System.		//-	
By:) 77 . S . Common of Regulared Assent		7/1/03 (Date)	_
, , ,		(macc)	
If signing on behalf of an entity:			
M. S. Green (Typod or Printed Name)		Assistant Secretary (Capacity)	
P-SEL-AR R RESTURNIE FLANTINGS		(capacity)	
* * *	FILING FEE: \$35.0	0 * * *	
CR2E045(9/00)			
Division of Corporations	P.O. Box 6327	Tallaharsee, FL 32314	