AM II: 2

NO FEE REQUIRED

File Number: STATEMENT OF CHANGE OF BUSINESS MAILING ADDRESS (see reverse for instructions) The entity identified below submits to the Secretary of State the following statement for the purpose of changing its business mailing address. 9:23 1. The name of the business entity is: 7 2. The business mailing address is currently on file as: 2005 HAR IT 3. The business mailing address is to be changed to: 4. Change of address is effective: Upon Receipt OR (Date) Signed: merchelle a10 80 Printed Name: Capacity: g:\corp\forms\miscforms\change\_address.pmd FILE ONE COPY