

P08856

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

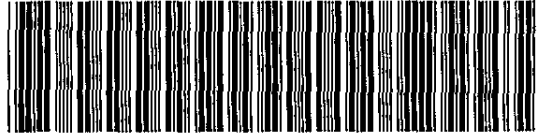
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

DDR
3/14/05



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 243422 7172389
AUTHORIZATION : *Patricia Pignatelli*
COST LIMIT : \$ 35.00

ORDER DATE : March 7, 2005
ORDER TIME : 9:38 AM
ORDER NO. : 243422-975
CUSTOMER NO: 7172389
CUSTOMER: Carol Levine
Principal Financial Group
711 High Street
Des Moines, IA 50392-4820

CHANGE OF AGENT

NAME: PREFERRED PRODUCT NETWORK,
INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd

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

1. The name of the corporation: PREFERRED PRODUCT NETWORK, INC.

2. The principal office address: 711 High St., c/o Carol Levine, Des Moines, IA 50392-0306

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 01/27/1986 Document number: F08856

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, FL 33324

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TALLAHASSEE, FLORIDA

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

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
(Signature of an officer or director)

Maureen Cullen, Attorney in Fact
(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.

Corporation Service Company
By Jacqueline M. Giles
(Signature of Registered Agent)

March 09, 2005
(Date)

If signing on behalf of an entity:

Jacqueline M. Giles, 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