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Public Access System

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To:

Division of Corporations

Pax Number : (850)617-6380

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850)222-1092

Fax Number

: (850)878-5926

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Corporate Filing Menu

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11/5/2008

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

statement of cha	provisions of sections 607.0502, 617.0502 inge is submitted for a corporation organi ir to change its registered office or register	zed under the laws of the State of Ge	orgia -	
1. The name of t	the corporation: ChoicePoint Services Inc.		_	
2. The principal	office address; 1000 Alderman Drive, Drop	71-N, Alpharetta, GA 30005		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 02/12/1997	Document number: 8333	317	
5. The name and Florida Depar	street address of the current registered ag- tment of State: (If resigned, enter resigned	ent and registered office on file with	the	
	The Prentice-Hall Corporation System, Inc.			
	1201 Hays Street, Suite 105		3 3	
	Tallahassee, FL 32301-2525			
6. The name and (if changed):	street address of the new registered agent	(If changed) and /or registered office	で置っ	
	C T Corporation	System		
c/o C T Corporation System, 1200 South Pine Island Road				
(P.O. Box NOT scoreptable)				
	Plantation, Flori	de 33324		
	ss of its registered office and the street a be identical. Is authorized by resolution duly adopted to board, or the corporation has been not			
Py	see 2 marker	Renee Simonton, Vice Pr		
(Signal I hereby accept I further agree to of my auties, and document is bein corporation has	the or to omeer or director) the appointment as registered agent and a comply with the provisions of all statu d I am familiar with and accept the oblig ng filed merely to reflect a change in the been notified in writing of this change.	Printed or typed name and the agree to act in this capacity es relative to the proper and compaction of my position as registered tregistered office address, I hereby	•	
By: okethur	C T Corporation System A Color Doc Towns of Registered Agent)	November 4 4	, 2008	
If signing on bel	half of an entity:			
Kathryn A.	Widdoes, Assistant Secretary			
(T	yped or Printed Name)			
	* * * Filing fei		•	
MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314				

PLOOG - 10/06/2008 E'T System Online

CR2E045 (8/05)