

837474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

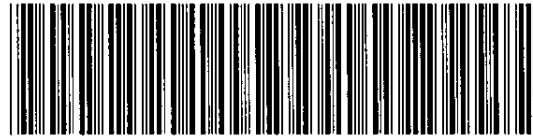
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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TALLAHASSEE, FLORIDA

R.A. Chong
C.COULLIETTE

JUN 10 2009

EXAMINER



CORPORATION SERVICE COMPANY'

ACCOUNT NO. : I20000000195
REFERENCE : 026675 7348133
AUTHORIZATION : *Spuddeenan*
COST LIMIT : \$ 35.00

ORDER DATE : June 4, 2009
ORDER TIME : 9:24 AM
ORDER NO. : 026675-005
CUSTOMER NO: 7348133

CHANGE OF AGENT

NAME: AUTISM SOCIETY OF AMERICA,
INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XXX PLAIN STAMPED COPY

CONTACT PERSON: Matthew Young

EXAMINER'S INITIALS: _____

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

1. The name of the corporation: AUTISM SOCIETY OF AMERICA, INC.
2. The principal office address: 7910 Woodmont Ave., Ste 300
Bethesda, MD 20814
3. The mailing address (if different): _____
4. Date of incorporation/qualification: _____ Document number: 837474
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Teresa Becerra
13254 SW 146th Street
Miami, FL 33186

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

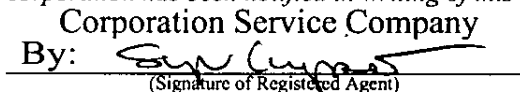
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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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, Attorney In Fact
(Signature of an officer or director) (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:  June 5, 2009
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:
Sylvia Queppet, Asst. Vice President
(Typed or Printed Name)

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