Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number: I2000000195

Phone : (850) 521-1000

Fax Number

: (850)558-1575

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

JJOHNSON@AXCETHR.COM Email Address:_

REGISTERED AGENT CHANGE AXCET HR SOLUTIONS, INC.

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

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

Pursuant to the provisions of sections 607.0502, 617.0502, 6 statement of change is submitted for a corporation organized in order to change its registered office or registered	d under the laws of the State of Kansas	
1. The name of the corporation: AXCET HR SOLUT	IONS, INC.	
2. The principal office address: 8345 Lenexa Drive, S	Suite 100	
Lenexa, KS 66214		
3. The mailing address (if different):	蒙绿 🕇	
4. Date of incorporation/qualification: 01/16/2007		
5. The name and street address of the current registered agen Florida Department of State:		
C T Corporation System	93 0	
1200 South Pine Island Road	OS REAL	
Plantation, FL 33324		
6. The name and street address of the new registered agent (i (if changed): Corporation Service Company	f changed) and /or registered office	
		
1201 Hays Street (P.O. Box NOT acceptable)		
Tallahassee, FL 32301		
The street address of its registered office and the street address changed will be identical.	dress of the business office of its registered agent,	
Such change was authorized by resolution duly adopted by authorized by the board, or the corporation has been notification.		
Signature of an officer or director)	Blanca Lozada, Attorney in Fact	
I hereby accept the appointment as registered agent and a I further agree to comply with the provisions of all statute of my duties, and I am familiar with and accept the obliga document is being filed merely to reflect a change in the recorporation has been notified in writing of this change.	gree to act in this capacity, s relative to the proper and complete performance tion of my position as registered agent. Or, if this egistered office address, I hereby confirm that the	
Corporation Service Company By: (Signature of Registered Agent)	March 1, 2010 (Dato)	
If signing on behalf of an entity:		
Sylvia Queppet, Assistant VP		
(Typed or Printed Name)		
* * * FILING FEE: \$35.00 * * *		