

FC8000000310

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

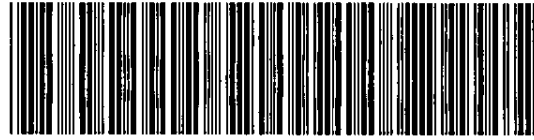
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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08/29/14--01020--001 \*\*35.00

*R. White*

SEP. -8 2014

R. WHITE

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AUG 29 AM 11:13  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE



CORPORATION SERVICE COMPANY

CSC - WILMINGTON  
Suite 400  
2711 Centerville Road  
Wilmington De 19808  
800-927-9800  
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard llockar2@cscinfo.com

Date: August 27, 2014

Order#: 261100-009

Re: CYMETRIX CORPORATION

Enclosed please find:

XX Change of Registered Agent and Office.  
XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.  
XX Issue Proof of Filing.  
XX Please return evidence to the following:

Attn: Lindsey Lockard  
c/o Corporation Service Company  
2711 Centerville Road, Suite 400  
Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

- 1. The name of the corporation: CYMETRIX CORPORATION
2. The principal office address: 2875 MICHELLE DRIVE, SUITE 250, IRVINE CA 92606
3. The mailing address (if different):
4. Date of incorporation/qualification: 01/23/2008 Document number: F0800000310

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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
Tallahassee FL 32301
P.O. Box NOT acceptable

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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.

Signature of officer or director: Dona Priebe, Vice President
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.

By: Grace E. Kirby Signature of Registered Agent
Date: 08/25/2014

If signing on behalf of an entity:
Grace E. Kirby, Assistant Vice President
Typed or Printed Name

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