

Division of Corporations

F13000004396

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6380

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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TALLAHASSEE, FLORIDA

**REGISTERED AGENT CHANGE
NTE DATA OPTIMAL NATIONAL SECURITY SERVICES, INC.**

Certificate of Status	0
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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, 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: NTT DATA OPTIMAL NATIONAL SECURITY SERVICES, INC.
- 2. The principal office address: 1231 GREENWAY DRIVE STE 900 IRVING, TX 75038
- 3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10/7/2013 Document number: F13000004396

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)

CORPORATION SERVICE COMPANY
1201 HAYS STREET, TALLAHASSEE, FL 32301

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

NRAI Services, Inc.
c/o NRAI Services, Inc., 1200 South Pine Island Road
Plantation, Florida 33324

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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.

Sharlin Aldao Signature of an officer or Director
Sharlin Aldao-Carillo, 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: Alfred Younan Assistant Secretary
NTT Corporation System Signature of Registered Agent
12/9/2014 Date

If signing on behalf of an entity:

NTT DATA OPTIMAL NATIONAL SECURITY SERVICES, INC.
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
CR2E045 (03/12)