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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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Special Instructions to Filing Officer:			
A. LUNT			
JUL 2 5 2011			
EXAMINER			

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SEGRETARY OF STATE TALL'AHASSEE, FLORIDA

JUL 25 PM 4:1



VIA U.S. Mail

July 22, 2009

Division of Corporations Florida Department of State P. O. Box 6327 Tallahassee FL 32314

RE: ISGN Fulfillment Agency, LLC

ILS Services, LLC

ISGN Fulfillment Services South, LLC

Dear Sir/Madam:

Enclosed for filing, please find three (3) Statements of Change of Registered Agent forms for the purpose of changing the registered agent to National Registered Agents, Inc. Three checks in the amount of \$25.00 is enclosed to cover the cost of each filing.

Please process upon receipt and return a filed stamped copy of each document in the enclosed self-addressed stamped envelope.

If you have any questions please do not hesitate to contact me. Thank you.

Very truly yours,

NRAI Corporate Services, Inc.

Dang Nguyen

Enclosures

COVER LETTER

TO:	Registration Section Division of Corporations		
SUB		N Fulfillment Agency, LLC	
	Name o	of Limited Liability Company	
Dear	Sir or Madam:		
The 6	enclosed Registered Agent/Registere	ed Office Change and fee(s) are submitted for filing.	
Pleas	e return all correspondence concerni	ing this matter to the following:	
	Dang Nguyen		N
	Name of Person	ASS ELEC	=
		ARE	35.11年1
	NRAI Corporate Services	, Inc.	3
	Firm/Company	SET O	
		F STATE PRIOR TO THE PRIOR TO T	
2875 Michelle Drive, Suite 100		<u> </u>	—
	Address	DE A	जन्म र
	Irvine, CA 92606		
	City/State and Zip Code		
<u> </u>	E-mail address: (to be used for future annual repo	ort notification)	
For fi	urther information concerning this m	natter, please call:	
	Dang Nguyen	at (949) 955-9585	
	Name of Person	Area Code & Daytime Telephone Number	
	STREET/COURIER ADDRESS:	MAILING ADDRESS:	
	Registration Section	Registration Section	
	Division of Corporations	Division of Corporations	
	Clifton Building	P.O. Box 6327	
	2661 Executive Center Circle	Tallahassee, Florida 32314	
	Tallahassee, Florida 32301		
	Enclosed is a check for the follow	wing amount:	
	\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

TO:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company:	ISGN Fulfillment Agency, LLC
2. (a) Principal office address of limited liability co	ompany:
(Note: MUST BE STREET ADDRESS)	3220 Tillman Drive, Suite 301 Bensalem, PA 19020
(b) Mailing address of limited liability company	;
(Note: MAY BE POST OFFICE BOX)	3220 Tillman Drive, Suite 301 Bensalem, PA 19020
4/18/2001	M0100000864
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office show	wn on the records of the Florida Dept. of State:
Registered Agent:	Corporation Service Company
Registered Office Address:	1201 Hays Street
	Tallahassee, FL 32301-2525
	SSR 25
(b) Enter name of NEW Registered Agent and/o	or NEW Registered Office address
NEW Registered Agent:	NRAI Services, Inc.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS	
	Tallahassee, ,FL32301
If the limited liability company is not organized und confirmed that after the change or changes are made and the business office of the registered agent will be liability company, it is hereby confirmed that the change of the members of the limited liability company or a or the operating agreement of the limited liability company or a signature of a member or authorized representative of a member	the Florida street address of the registered office
Chetan Patel	
Printed or typed name of signee	t and agree to get in this eargeits. I finthey agree to
comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability co	t and agree to act in this capacity. I further agree to the proper and complete performance of my duties, my position as registered agent as provided for in I to merely reflect a change in the registered office ompany has been notified in writing of this change.
Ticole Choungsignature of Registered Agent Nicole Chou	inard, Assistant Secretary