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Office Use Only



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SECRETARY OF STATEMENT OF STAT



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Vera M. Norris

Date: October 21, 2013

Order#: 845195-010

Re: ORCOM SOLUTIONS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

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: Vera M. Norris 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 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: ORCO	OM SOLUTIONS, LLC
2. (a) Principal office address of limited liability (Note: MUST BE STREET ADDRESS	y company: 250 E Arapaho Road, STE 100 Richardson, TX 75081
(b) Mailing address of limited liability compa (Note: MAY BE POST OFFICE BOX)	any: 250 E Arapaho Road, STE 100 Richardson, TX 75081
3/25/2009	M0900001182
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office s	shown on the records of the Florida Dept. of State:
Registered Agent:	C T Corporation
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324
(b) Enter name of <u>NEW Registered Agent</u> a <u>NEW Registered Agent</u> :	nd/or NEW Registered Office address: Corporation Service Company
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDR	1201 Hays Street
confirmed that after the change or changes are m and the business office of the registered agent wi liability company, it is hereby confirmed that the	TANKS SE
Dona Priebe, Authorized Person Printed or typed name of signee	
comply with the provisions of all statutes relative and I am familiar with and accept the obligation Chapter 608, F.S. Or, if this document is being address, whereby confirm that the limited liability	gent and agree to act in this capacity. I further agree to e to the proper and complete performance of my duties, s of my position as registered agent as provided for in filed to merely reflect a change in the registered office by company has been notified in writing of this change.
By: Corporation Service Co	ompany Sylvia Queppet, Asst. Vice President

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00