Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H110001996113)))



H110001996113AEC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195

: (850)521-1000

Phone

: (850)558-1515 Fax Number

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

REGISTERED AGENT CHANGE - INOVANT LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$39.00
	1-0-1

Electronic Filing Menu

Corporate Filing Menu

Help

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: INOVANT LLC	2
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	900 Metro Center Blvd. Foster City, CA 94404
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
7/28/2010	M1000003337
3. Date of filing/registration in Florida 4	Document number
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:
Registered Agent:	CT Corporation System
Registered Office Address:	1200 South Pine Island Road Plantation FL 33324
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	Registered Office address:
NEW Registered Agent:	Corporation Service Company
(MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street Tallahassee FL 32301
If the limited liability company is not organized under the la that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the cashereby confirmed that the change(s) was/were authorized by liability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member)	ws of the State of Florida, it is hereby confirmed address of the registered office and the business se of a Florida limited liability company, it is an affirmative vote of the members of the limited
Maureen Cullen, Vice President (Printed or typed name of signee)	
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the proj am familiar with and accept the obligations of my position a F.S. Or, if this document is being filed to merely reflect a ch confirm that the limited liability company has been notified i	ree to act in this capacity. I further agree to ver and complete performance of my duties, and I is registered agent as provided for in Chapter 608, vange in the registered office address, I hereby in writing of this change.
By: Signature of Registered Agent) Corporation Service Company	
- Corporation Service Company	

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