(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



800256966938

02/26/14--01028--007 \*\*35.00



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: February 24, 2014

Order#: 010989-015

Re: UNISYS 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 ÓF CHÁNGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, inge is submitted for a corporati r to change its registered office	on organized under the la	tws of the State of [	DE		
1. The name of	the corporation: UNISYS CORP	ORATION	<del></del>			
	office address:EW DRIVE SUITE 100, BLUE I					
3. The mailing a	ddress (if different):					
4. Date of incorp	poration/qualification: 04/09/19	84 Document	number: P01551			
	I street address of the current regetment of State: (If resigned, enter		red office on file wi	th the		
	CT CORPORATION SYSTEM					
	1200 S. PINE ISLAND ROAD					
	PLANTATION	FL	33324	TACK 294		
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					
	P.C Tallahassee	D. Box NOT acceptable	32301	P		
The street address changed will	ess of its registered office and the identical.	ne street address of the bi	usiness office of its	registered agent,		
Such change wa authorized by th	as authorized by resolution duly ne board, or the corporation has	adopted by its board of been notified in writing	directors or by an o of the change.	officer so		
To		DONA PRIEBE	, VICE PRESIDEN	١T		
Signatu	an officer or director	Print	ted or typed name and title	2		
I further agree of performance of agent. Or, if the hereby confirm	the appointment as registered of comply with the provisions of my duties, and I am familiar wis document is being filed mere that the corporation has been real Service Company	f all statutes relative to ti ith and accept the obliga ly to reflect a change in t	he proper and com tion of my position the registered office	as registered		
By: Ing	ce Cokuble	02/18/2014	51-161 Table 100			
Sig	nature of Registered Agent		Date			
If signing on be	half of an entity:					
GRACE E. KIRI	BY, ASSISTANT VICE PRESID	ENT				
T	yped or Printed Name	<del>_</del>				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 (03/12)

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