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Florida Department of State
Division of Corporations
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ACCESS LOGIC, INC.

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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 Colorado *in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: Access Logic, Inc.

2. The principal office address: 4230 Beechwood Drive, Greensboro, North Carolina 27410

3. The mailing address (if different):

4. Date of incorporation/qualification: 9/5/1996 Document number: F95000004315

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

FULLER, BARRY J

FULLER & ASSO., ATTORNEY AT LAW, 2301 PARK AVE.

ORANGE PARK, FL 32073

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

Business Filings Incorporated

1203 Governors Square Blvd, Suite 101
(P.O. Box or personal mailbox NOT acceptable)

Tallahassee, Florida 32301-2960

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.

(Signature of an officer, chairman or vice chairman of the board)

Terri L. Kim, 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.

(Signature of Registered Agent)

February 6, 2007
(Date)

If signing on behalf of an entity:

Mark Schiff
(Typed or Printed Name)

AVP
(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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