## 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# M08000002628

City-St-Zip:

Entity Name: SUNGARD AVANTGARD LLC

FILED Oct 12, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 23975 PARK SORRENTO 23975 PARK SORRENTO 4TH FLOOR SUITE 100 CALABASAS, CA 91302 CALABASAS, CA 91302 **Current Mailing Address:** New Mailing Address: 23975 PARK SORRENTO 23975 PARK SORRENTO SUITE 100 4TH FLOOR CALABASAS, CA 91302 CALABASAS, CA 91302 FEI Number: 95-3440473 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: WILLIAM MULLIN Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete MCDUGALL, THOMAS J Name: Name: Address: 680 E SWEDESFORD RD Address: City-St-Zip: WAYNE, PA 19087 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: RUANE, MICHAEL J Name: Address: 680 E SWEDESFORD RD Address: City-St-Zip: WAYNE, PA 19087 City-St-Zip: Title: MGR () Delete Title: () Change () Addition SILBEY, VICTORIA E Name: Name: 680 E SWEDESFORD RD Address: Address: City-St-Zip: **WAYNE, PA 19087** City-St-Zip: Title: () Delete Title: MGR ( ) Change (X) Addition Name: Name: MULLIN, WILLIAM 601 WALNUT STREET, SUITE 1010 Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

City-St-Zip:

PHILADELPHIA, PA 19106

SIGNATURE: WILLIAM MULLIN MGR 10/12/2009