

Electronic Filing Cover Sheet

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(((H090001186663)))



HD90001188863ABC4

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To:

Division of Corporations

Fax Number : (850

: (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-1000 Fax Number : (850)558-1575

COD X2951

MECELVER 009 MAY 11 AM 8: 00 SECRETARY OF STATE

REGISTERED AGENT CHANGE

CLARIFI, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

O9 MAY 11 PH 2: 39
SECRETARY OF STATE
AND ASSET FLOORING

5/11/2009

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe



STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.0502, 617.0502,		
statement of cha	nge is submitted for a corporation organize	ed under the laws of the State of Del	aware
in orde	r to change its registered office or registere	ed agent, or both, in the State of Flori	da.
1. The name of t	he corporation: Clarifi, Inc.		
	office address: 55 Water Street		
	c, NY 10020		
3. The mailing a	ddress (if different): 1221 Avenue of	the Americas	
	k, NY 10020		
4. Date of incorp	poration/qualification: 02/02/2000	Document number: F000000	00675
	I street address of the corrent registered agest traent of State:	nt and registered office on file with th	16
	Rothberg, Michael, J		
٠.	7551 Isla Verde		28 0
	Delray Beach, FL 33446		CAR TO
6. The name and (if changed):	i street address of the new registered agent (if changed) and for registered office	22X
	Corporation Service Company		PH 2:
	1201 Hays Street		39 151
	(P.O. Box NOT acceptable)		57
	Tallahassee, FL 32301	<u></u>	` "
The street addre	ss of its registered office and the street ad be identical.	dress of the business office of its re	gistered agent,
Such change wa authorized by th	is authorized by resolution duly adopted he board, or the corporation has been notif	y its board of directors or by an off red in writing of the change.	icer so
	A State of the sta	Deborah M. Flanagan, Vice	
Corporate By: Jane If signing on be	the appointment as registered agent and a comply with the provisions of all statute of am familiar with and accept the obligang filed merely to reflect a change in the reflect a change in the reflect motified in uniting of this change. ion Service Company metter of lightered agent to Budhu, Asst. Vice President half of an entity:	••••	
JAVET	Yped or Primed Name)		
(4,	Nime or a desired landered.		

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEB, FL 32314
CR2E045 (8/05)