

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)205-0380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number : (850) 222-9428

REGISTERED AGENT CHANGE

YENVED -5 AH 7: CORPORATIO CALLISMA, INC.

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

Purxuant 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	
Delaware in order to change its registered office or registered agent, or both, in the State	
of Florida.	
1. The name of the corporation: Callisma, Inc.	
2. The principal office address: 1550 The Alameda, Ste. 305	,
San Jose, CA 95126	
3. The mailing address (if different):	
4. Date of incorporation/qualification: February 8, 2000 Document number: F00000000697	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
Corporation Service Company	
1201 Hays Street	
Tallahassen, FL 32301-2525	
6. The name and street address of the new registered agent (if changed) and for registered office (if changed):	
C T Corporation System	
c/o C T Corporation System	
(P.O. Box or personal mailbox NOT acceptable)	
1200 South Pine Island Road, Plantation, Florida 33324	,
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 charmas of the bears) Alighat Alighet David F. Mirgo, Vice Attained and title (Printed on types 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.	TE
By: 11 514104 Fig =	M 9: 27
(Signature of Registered Agent) (Date)	ڡۣ
If signing on behalf of an entity:	27
- KIRK-HOOD	
ASSISTANT SECRETARY * * FILING FEE; \$35.00 * * *	

MAXE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: DIVISION OF CORPORATIONE, P.O. HOX 6327, TALLAHASSEE, FL 32314