

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850)222-1092 Fax Number : (850)878-5368

REGISTERED AGENT CHANGE

TELGIAN CORPORATION



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Corporate Filing Menu

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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 _ in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: Telgian Corporation 2. The principal office address: 11230 Sorranto Valley Road, Suite 225, San Diego, California 92121 3. The mailing address (if different): 2615 S. Industrial Park Avenue, Tempe, Arizona 85282 P00000001713 3/28/2000 4. Date of incorporation/qualification: Document number: 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) Paracorp Incorporated 236 East 6th Avenue Tallahassee, Florida 32303 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): CT Corporation System c/o C T Corporation System, 1200 South Pine Island Road P.O. Box NOT acceptable 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. Bob VanDeVcirs/ Executive YP/Finance Stanature of an officer or director 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. C T Corporation System Prout If signing on behalf of an entity/aria Ozaeta Vice President Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

MAIL TO: DIVISION OF CORPORATIONS, F.O. BOX 6327, TALLAHASSEE, FL 32314

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