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(Requestor's Name)				
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CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE : ,264-515

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : July 3, 2012

ORDER TIME : 9:54 AM

ORDER NO. : 264515-003

CUSTOMER NO: 7174795

CHANGE OF AGENT

NAME: CORNING DATA SERVICES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce

EXAMINER'S INITIALS:

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

statement of chan	rovisions of sections 607.0502, 617.0502 ge is submitted for a corporation organiz	zed under the laws of the State of \overline{N}	lew York	
	to change its registered office or register		orida.	
1. The name of the corporation: CORNING DATA SERVICES, INC.				
2. The principal office address: 139 Wardell Street, Corning, NY 14830				
3. The mailing address (if different): 139 Wardell Street, PO Box 1187, Corning, NY 14830				
4. Date of incorpo	oration/qualification: 04/25/2001	Document number: F010000	02203	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:				
•	NRAI Services, Inc.			
-	515 E. Park Avenue		DOLL TO	
•	Tallahassee, FL 32301		PER -	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Corporation Service Company				
-	Corporation Service Company		多至 68	
	1201 Hays Street		100 m	
(P.O. Box NOT acceptable)				
- -	Tallahassee, FL 32301			
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.				
Wall	reentablel	Maureen Cathell, Vice Preside	ent	
I hereby accept to I further agree to of my duties, and document is bein corporation has	he appointment as registered agent and be comply with the provisions of all statul I am familiar with and accept the oblig filed merely to reflect a change in the been notified in writing of this change. In Service Company	tes relative to the proper and com gation of my position as registered registered office address, I hereb	nlete performance	
By: (Sign	nature of Registered Agent)	July 3, 2012 (Date)		
If signing on behalf of an entity:				
Grace E. Kirby, Assistant Vice President				
(Typed or Printed Name) * * * FILING FEE: \$35.00 * * *				
	o o o bili, lingle bib.	D.: M.35.00 " " "		

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