

SEP-21-2004 11:10  
Division of Corporations

CT CORPORATION

**F01000003443**

Florida Department of State  
Division of Corporations  
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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**

**BENEFITPOINT, INC.**

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

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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, the undersigned corporation organized under the laws of the State of Delaware submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : BenefitPoint, Inc.

2. The mailing address of the corporation : 301 Howard St., 6th Floor, San Francisco, CA 94105

3. Date of incorporation/qualification: 06/28/01 Document number: F01000003443

4. The name and address of the current registered agent and office:

NRAI Services, Inc.

526 E. Park Avenue

Tallahassee, FL 32301

5. The name and address of the new registered agent (if changed) and/or registered office (if changed) (P. O. Box Not Acceptable)

CT Corporation System

c/o CT Corporation System, 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.

Emil Erickson  
(Signature of an officer, chairman or vice chairman of the board)

9/13/04  
(Date)

EMIL ERICKSON - CFO

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

CT Corporation System

By: Howard L. Volk

(Signature of Registered Agent)

Howard L. Volk  
Asst. Secretary

9-20-04

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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