

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : NRAI CORPORATE SERVICES, INC.

Account Number : I20080000023

Fax Number

: (651)225-9500 : (651)225~9579

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

REGISTERED AGENT CHANGE JACK HENRY & ASSOCIATES, INC.

Certificate of Status	0
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Page Count	01
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Help

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

	rder to change its registered office or registered agent, or both, in the State of Florida.
1. The name	of the corporation: Jack Henry & Associates, Inc.
2. The princi	pal office address: 663 W. Highway 60, Monett, MO 65708
3. The mailin	ng address (if different):
4. Date of inc	corporation/qualification: 06/29/2001 Document number: F010000003480
5. The name	and street address of the current registered agent and registered office on file with the partment of State: (If resigned, enter resigned)
	LexisNexis Document Solutions Inc.
	1201 Hays Street
	Tallahassee, FL 32301
6. The name ((if changed	and street address of the new registered agent (if changed) and /or registered office
	515 East Park Avenue,
	P.O. Box NOT acceptable
	Tallahassee, Florida 32301
The street ad as changed w	dress of its registered office and the street address of the business office of its registered agent vill be identical.
Such change authorized by	was authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.
Su	Sue Johnson, Vice President
-	nature of an other or director Printed or typed name and title
nereoy acce further agre verformance vereoy. Or, if vereby confir	ept the appointment as registered agent and agree to act in this capacity. See to comply with the provisions of all statutes relative to the proper and complete of my dulties, and I am familiar with and accept the obligation of my position as registered this document is being filed merely to reflect a change in the registered office address, I rm that the corporation has been notified in writing of this change.
NR	(Al Services, Inc.)
By:	Signature of Registered Agent Date
f signing on	behalf of an entity:
Jackie Bernu,	Assistant Secretary

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)