F01000004730

| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| (Document Number) |
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| Special Instructions to Filing Officer: |
| Special instructions to 1 imig Officer. |
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Office Use Only



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SECRETARY OF STATION OF CORPORATION OF CORPORATION



R.A Charge C.COULLIETTE APR 0 7 2009 EXAMINER



CORPORATION SERVICE COMPANY ACCOUNT NO. : 072100000032

REFERENCE : 946498 4701624

AUTHORIZATION : C

COST LIMIT

ORDER DATE: April 2, 2009

ORDER TIME : 9:19 AM

ORDER NO. : 946498-165

CUSTOMER NO: 4701624

CHANGE OF AGENT

NAME:

DRS SURVEILLANCE SUPPORT

SYSTEMS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

___ CERTIFIED COPY XXX PLAIN STAMPED COPY

CONTACT PERSON: Matthew Young

EXAMINER'S INITIALS:

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

| statement of cha | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Delaware er to change its registered office or registered agent, or both, in the State of Florida. | |
|--|--|-----|
| 1. The name of | the corporation: DRS SURVEILLANCE SUPPORT SYSTEMS, INC. | |
| 2. The principal | office address: | |
| 6200 118 | 8th Avenue, Largo, FL 33773 | |
| - | way, Parsippany,NJ 07054 | |
| 4. Date of incorp | poration/qualification: 09/06/2001 Document number: F01000004730 | |
| | d street address of the current registered agent and registered office on file with the rtment of State: | |
| | C T Corporation System | Ų |
| | 1200 South Pine Island Road Plantation, FL 33324 | 17. |
| | Plantation, FL 33324 | Ź |
| 6. The name and (if changed): | 1200 South Pine Island Road Plantation, FL 33324 d street address of the new registered agent (if changed) and /or registered office Corporation Service Company | |
| | 1201 Hays Street | ď |
| | (P.O. Box NOT acceptable) | |
| | Tallahassee, FL 32301 | |
| The street address changed will | ess of its registered office and the street address of the business office of its registered agent, l be identical. | |
| Such change was authorized by the | as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change. | |
| Her | Maureen Cullen, Attorney in Fact | |
| I Nereby accept I further agree of my duties, an document is bei corporation has | the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the speed of the confirm that the confirm | |
| By: S | tion Service Company 04/03/2009 | |
| (Si) | gnature of Registered Agent) (Date) | |
| If signing on be | ehalf of an entity: | |
| | opet, Asst. VP | |
| Γ) | Typed or Printed Name) | |
| | * * * 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 (8/05)