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TAN 1 1 2013 T. ROBERTS



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE : 487161

AUTHORIZATION

COST LIMIT

ORDER DATE: January 7, 2013

ORDER TIME : 3:08 PM

ORDER NO. : 487161-025

CUSTOMER NO: 7764087

CHANGE OF AGENT

NAME:

SCHNEIDER ELECTRIC IT MISSION

CRITICAL SERVICES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS:



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 10, 2013

CSC STEPHANIE MILNES TALLAHASSEE, FL Please give original submission date as file date.

SUBJECT: SCHNEIDER ELECTRIC IT MISSION CRITICAL SERVICES, INC.

Ref. Number: F01000006590

We have received your document for SCHNEIDER ELECTRIC IT MISSION CRITICAL SERVICES, INC. and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Teresa Brown Regulatory Specialist II

Letter Number: 713A00000721

DEPARTMENT OF STATE

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

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
	inge is submitted for a corporation organized under the laws of the State of Virginia r to change its registered office or registered agent, or both, in the State of Florida.
	the corporation: Schneider Electric IT Mission Critical Services, Inc.
1. The name of	office address: 12150 Monument Drive, Suite 150 Fairfax VA 22033
z. The principal	office address:
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 12/27/2001 Document number: F01000006590
	I street address of the current registered agent and registered office on file with the trment of State: (If resigned, enter resigned)
	C T CORPORATION SYSTEM
	1200 SOUTH PINE ISLAND ROAD
	PLANTATION FL, 33324
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	Corporation Service Company
	1201 Hays Street
	P.O. Box NOT acceptable Tallahassee, FL 32301
	Talianassee, FL 32301
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was	is authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.
Signatur	Mary Kibble - Assistant Secretary Printed or typed name and table
agent. Or, ij ini hereby confirm Corporatio	the appointment as registered agent and agree to act in this capacity, o comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered s document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change. In Service Company
By: July	Little of Registered Agent Date
lf signing on be	half of an entity:
	ine N. Casper, Assistant VP
T)	/ped 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 (03/12)