

F03000004223

Florida Department of State
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To: Division of Corporations
Fax Number : (850) 205-0380

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
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Attn: Darken

please refine and
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Thanks!

Jennifer

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DIVISION OF CORPORATIONS

REGISTERED AGENT CHANGE

PSC HEALTHCARE SOFTWARE, INC.

Certificate of Status	0
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Page Count	023
Estimated Charge	\$35.00

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CT CORPORATION SYSTEM

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PAGE 001/001 Florida Dept of State



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

October 10, 2005

PSC HEALTHCARE SOFTWARE, INC.
ATTN: TAX DEPARTMENT
P.O. BOX 269005
PLANO, TX 75026-9005

SUBJECT: PSC HEALTHCARE SOFTWARE, INC.
REF: F03000004223

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

PLEASE REMOVE THE CORPORATE NAME AT THE BOTTOM OF THE DOCUMENT. THE CORPORATE NAME SHOULD APPEAR IN SECTION 1 OF THE DOCUMENT ONLY.

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) 245-6906.

Darlene Connell
Document Specialist

FAX Aud. #: R05000238689
Letter Number: 405A00061453

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, this statement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: PSC Healthcare Software, Inc.
2. The principal office address: 2300 W. Plano Parkway, Plano, TX 75075
3. The mailing address (if different):
4. Date of incorporation/qualification: 8-22-03 Document number: F03000004223

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

CT Corporation System
c/o CT Corporation System, 1200 South Pine Island Road
(P.O. Box NOT acceptable)
Plantation, Florida 33324

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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.

By: [Signature] [Signature]
(Signature of an officer or director) (Signature of registered agent)

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature] Michael E. Jones
(Signature of Registered Agent Secretary)

10-7-05
(Date)

If signing on behalf of an entity:

(Type 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
CR25043 (8/03)