00000419 Florida Department of State Division of Corporations

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TO:

Division of Corporations (850)205-0380

Fax Number

From:

: C T CORPORATION SYSTEM

Account Number : FCA000000023 Account Name

phone

: (850)222-1092

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; (850) 878-5926

REGISTERED AGENT CHANGE

SSA GLOBAL TECHNOLOGIES, INC.

SSA GLOBAL 1	0
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CT CORP

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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, this statement of change is submitted for a corporation organized under the laws of the State of Delawate
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: SSA Global Technologies, Inc.
2. The principal office address: 500 West Madison St., Chicago, IL 60661
3. The mailing address (if different): 100 Staples Dr., Tax Department, Framingham, MA 01702
4. Date of incorporation/qualification: 9/25/03 Document number: F03000004794
 The name and street address of the current registered agent and registered office on file with the Florida Department of State:
National Corporate Research, LTD
515 F. Park Ave.
Tallahassec, PL 32301
515 F. Park Ave. Tallahassec, PL 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 sceepable) Plantage Florida 32324
C T Corporation System P 3.03
c/o C T Corporation System, 1200 South Pine Island Road
(P.O. Box NOT acceptable)
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, or the corporation has been notified in writing of the change.
(Signature of structure) Jennifer Ay Itman Secretary
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree the 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.
By: C T Corporation System (Signature of Registered Agent) (Date)
If signing any behalf of an entity Bonni M. Deltenbach Special Assistant Secretary
(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

71.066 - 09/14/2003 C T System Online

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