

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0380

From:

Account Name : NATIONAL CORPORATE RESEARCH, LTD.
Account Number : I20000000088
Phone : (800) 221-0102
Fax Number : (212) 564-6083

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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REGISTERED AGENT CHANGE

COMPUTER LOGIC GROUP INC.

Certificate of Status	0
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DIVISION OF CORPORATIONS

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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 NEW YORK in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: COMPUTER LOGIC GROUP INC.
2. The principal office address: 33 COMAC LOOP
RONKONKOMA, NY 11779
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/05/2004 Document number: F04000000046
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

UCC FILING & SEARCH SERVICES, INC.1574 VILLAGE SQUARE BLVD SUITE 100TALLAHASSEE FL 32309

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

NATIONAL CORPORATE RESEARCH LTD515 EAST PARK AVENUE(P.O. Box NOT acceptable)TALLAHASSEE FL 32301

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.

Pratichand Nader
(Signature of an officer or director)

PRATICHAND NADER CONTROLLER
(Printed or typed name and title)

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.

Karen McKeown
(Signature of Registered Agent)

December 20, 2006(Date)

If signing on behalf of an entity:

Karen McKeown - 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
CR2H045 (R/05)

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