ecaonic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number : (850)878-5368

REGISTERED AGENT CHANGE

GLOBAL WORKS SYSTEMS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

All offelp

4/28/2009

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

statement of chai	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 California to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	Global Works Systems, Inc.
2. The principal	261 Mountain View Drive Suite 401 Colchaster VC 5446
3. The mailing ac	ddress (if different): 12125 Technology Drive, Eden Prairie, MN 55344
4. Date of incorp	oration/qualification: 03/26/2004 Document number: F04000001675
	street address of the current registered agent and registered office on file with the transfer of State: (If resigned, enter resigned)
	NRA) Services, Inc.
	2731 Executive Park Drive. Suite 4
	Weston, FL 33331
6. The name and (if changed):	NRA) Services. Inc. 2731 Executive Park Drive. Suite 4 Weston. FL 33331 Street address of the new registered agent (if changed) and /or registered office
	C T Corporation System
	c/o C T Corporation System, 1200 South Pine Island Road
	(F.O. Box NOT acceptable)
	Plantation, Florida 33324
- .	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
ZaA.	Brigid M. Spicola, Assistant Secretary
ا حزا	the oppositement as registered opent and games to sed in this concepts
corporation pas	the appointment as registered agent and agree to act in this capacity. a comply with the provisions of all statutes relative to the proper and complete performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
~ X.	CT Corporation System 4-28-09
	mature of Reguicoca Agent) (Date)
If signing on bel	half of an entity: Samantha Jones Assistant Secretary
. (7	yped or Printed Name)
	* * * FILING FEE; \$35,00 * * *
M	Make checks payable to Florida Department of State all to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FLUID - 10/06/2008 CT System O=1ime

CR2E045 (8/05)

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