

F04000001767Florida Department of State
Division of Corporations
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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

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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REGISTERED AGENT CHANGE
AUS MARKETING RESEARCH SYSTEMS, INC.

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COVER LETTER

**TO: Amendment Section
Division of Corporations**

SUBJECT: AUS MARKETING RESEARCH SYSTEMS, INC.
Name of Corporation

DOCUMENT NUMBER: FD4000001767

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Hildegard Amme

Name of Contact Person

AUS MARKETING RESEARCH SYSTEMS, INC.
Firm/Company

155 Gailher Drive, Ste A
Address

Mount Laurel, NJ 08054
City/State and Zip Code

E-mail address: (to be used for future annual report notification) hamme@ausinc.com

For further information concerning this matter, please call:

Name of Contact Person _____ at () _____
Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CUZBQ45 (H/O5)

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

1. The name of the corporation: AUS MARKETING RESEARCH SYSTEMS, INC.
2. The principal office address: 155 Gaither Drive, Ste A, Mount Laurel, NJ 08054
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 03/22/2004 Document number: F04000001767

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525 US

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

C T Corporation System
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.

Hildegard E. Arango
Signature of an officer or director

Hildegard E. Arango
Printed or typed name and title
Asst. Treas.

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.

C T Corporation System
By: Maria T. Chambers
Signature of Registered Agent

4/12/2011
Date

If signing on behalf of an entity:

Maria T. Chambers
Special Assistant Secretary

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR22045 (8/03)