F04000003772

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R.A. Chg. C.COULLIETTE

DEC 15 2011

EXAMINER



ACCOUNT NO. : 12000000195

REFERENCE : 013414

AUTHORIZATION /

COST LIMIT

ORDER DATE: December 5, 2011

ORDER TIME : 9:40 AM

ORDER NO. : 013414-098

CUSTOMER NO: 7683518

CHANGE OF AGENT

NAME: ASRC MANAGEMENT SERVICES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd

EXAMINER'S INITIALS:

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

statement of ch	ange is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Statutes, organized under the laws of the State of Alaska registered agent, or both, in the State of Florida.	this	_
1. The name of	the corporation: ASRC MANAGI	EMENT SERVICES, INC.		
			· · · · · · · · · · · · · · · · · · ·	
6303 Ivy I	Lane, Suite 130, Greenbelt, MD 2	20770		
3. The mailing	address (if different):			
4. Date of incor	rporation/qualification: 07/02/2004	Document number: F0400003772		
	d street address of the current register rement of State:	red agent and registered office on file with the		
	NRAI Services, Inc.			
	515 E. Park Avenue			350
	Tallahassee, FL 32301		DEC 15	9. 第二条
6. The name an (if changed):		agent (if changed) and /or registered office	P	RY OF C
	Corporation Service Company		1:29	A A
	1201 Hays Street			: P
	(P.O. Box NOT acce	ptable)		
	Tallahassee, FL 32301			
The street addras changed will	ess of its registered office and the st l be identical.	treet address of the business office of its register	red agen	ıt,
Such change wauthorized by t	as authorized by resolution duly add he board, or the corporation has bee	opted by its board of directors or by an officer sen notified in writing of the change.	0	
	ure of an officer or director)	Maureen Cathell, Vice President		.
I hereby accept I further agree of my duties, ar document is be corporation ha	t the appointment as registered ages	(Printed or typed name and title) Int and agree to act in this capacity. I statutes relative to the proper and complete per I sobligation of my position as registered agent. In the registered office address, I hereby confirations.	rforman Or, if th n that th	ce iis ie
By:	gnature of Registered Agent)	12/09/2011 (Date)		
	chalf of an entity:	(Sale)		
	Dawson, Asst. Vice President			
	Typed or Printed Name)			

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