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To:

Division of Corporations

Fax Number : (850)617-6380

From:

: CORPORATION SERVICE COMPANY Account Name

Account Number: I2000000195 Phone : (850)521~1000

Fax Number : (850)558-1575

REGISTERED AGENT CHANGE

MOVEABLE CUBICLE INC.

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

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10121



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

statement of chang	ovisions of sections 607.0502, 617.0502, e is submitted for a corporation organiz o change its registered office or register	ed under the laws of the State of Dela	aware
1. The name of the	corporation: MOVEABLE CUB	ICLE, INC.	
2. The principal of 6404 Falls	fice address:	eigh, NC 27615	
3. The mailing add	ress (if different):		
4. Date of incorpor	ation/qualification: 07/19/2004	Document number: F0400000	4095
5. The name and st Florida Departm	reet address of the current registered ago ent of State;	ent and registered office on file with the	3
C	CT Corporation System		
1	200 South Pine Island Road		
Ī	Plantation, FL 33324		700 35 35
6. The name and st (if changed):	reet address of the new registered agent	(if changed) and /or registered office	2009 OCT 12 SECRE TARY
	Corpororation Service Compan	y	सिं
1	201 Hays Street		PH S
~	(P.O. Box NOT acceptable)		
	fallahassee, FL 32301		9
The street address as changed will be	of its registered office and the street a	ddress of the business office of its reg	gistered agent,
Such change was authorized by the	authorized by resolution duly adopted board, or the corporation has been not	by its board of directors or by an officified in writing of the change.	cer so
Signature	2475 Och	Vikram Bhujbal, CFO	·
I hereby accept th I further agree to of my duties, and . document is being corporation has b	e appointment as registered agent and comply with the provisions of all statu I am familiar with and accept the oblig filed merely to reflect a change in the een notified in writing of this change.		e performance ent. Or, if this infirm that the
Sign	on Service Company	October 12, 2009	
∬ (Sigon	ture of Registred Agent)	(Date)	
If signing on beha	lf of an entity:		
Sylvia Quepp	et, Asst. VP ed or Printed Name)	•	
(137р	ed of Printed (Name)	7. \$25 AA * * *	