Florida Department of State

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SECRETARY CHAINTE

COR AMND/RESTATE/CORRECT OR O/D RESIGN CHOICEPOINT WORKPLACE SOLUTIONS INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$43.75

JAN 07 2010

EXAMINER

COVER LETTER

TO: **Amendment Section** Division of Corporations SUBJECT: ChoicePoint WorkPlace Solutions Inc. Name of Corporation DOCUMENT NUMBER: F04000006343 The enclosed Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Firm/Company Address City/State and Zip Code renee.simonton@reipmsi.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is \$35.00 Filing Fee \$43.75 Filing Fee & Certificate of Status \$43.75 Filing Fee & Certified Copy (Additional copy is suclosed) Mailing Address: Amendment Section Street Address: Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

	(1-5 140	of DE COMPLETED)		
		04000006343		
	(Document num	bar of corporation (if kn	own)	
1	ChoicePoint	WorkPlace Solutions Inc	J.	
	(Name of corporation as it appear	ers on the records of the	Department of State)	
2	Georgia	3	11/05/2004	
	(Incorporated under laws of)	(Dat	e authorized to do business in Florida)	
	S (4-7 complete oni	ECTION II LY THE APPLICABLE	Changes)	
4. If the amer	ndment changes the name of the corpora	tion, when was the	change effected under the laws of	
its jurisdic	tion of incorporation? 01/01/2010		_	
5. LexisNexis	Screening Solutions Inc.			
(Name of c appropria	corporation after the amendment, adding the abbreviation, if not contained in new	suffix "corporation name of the corpora	," "company," or "incorporated," or tion)	
(If new nan business in	ne is unavailable in Florida, enter altem n Florida)	ate corporate name a	dopted for the purpose of transacting	-
6. If the amer	ndment changes the period of duration,	indicate new period	of duration. CRETAR)	dien.
	(1	New duration)		
7. If the amer	ndment changes the jurisdiction of incom	poration, indicate ne	9	
	(N	ew jurisdiction)		Win Barr
8. Attached is 90 days pri having cus	s a certificate or document of similar im for to delivery of the application to the I tody of corporate records in the jurisdic	port, evidencing the Department of State, tion under the laws	amendment, authenticated not more the by the Secretary of State or other official which it is incorporated.	han cial
7	Stellamonton			
(Sign of a	nature of a director, president or other officer - i receiver or other court appointed fiduciary, by	f in the hands hat fiduciary)		
	Rence Simonton		Vice President	
(Typed or printed name of person signing)		(Title of person signing)	



Secretary of State Corporations Division 315 West Tower

#2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

DOCKET NUMBER
PRINT DATE
FORM NUMBER

: 100041003 : 01/04/2010

: 218

CT CORPORATION SYSTEM/PATTIE HARDY 1201 PEACHTREE STREET,NE ATLANTA, GA. 30361

CERTIFICATE OF FACT

I, Wesley B. Tailor, the Deputy Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

Effective January 1, 2010, Choicepoint Workplace Solutions Inc. a Georgia corporation incorporated on 9/17/2004. Changed the name to Lexisnexis Screening Solutions Inc.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence of the existence or nonexistence of the facts stated within.

Wesley B. Tailor Deputy Secretary of State

Dealey B Pail