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To:		,
	Division of Corporations	
	Fax Number : (850)617-6380	•
From:		- - - - - - - - - -
	Account Name : CORPORATION SERVICE COMPANY	
	Account Number : 12000000195	
	Phone : (850) 521-0821	1
	Fax Number : (850)558-1515	
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Inter the	e email address for this business entity to be used for mitire a	
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REGISTERED AGENT CHANGE INTERMOUNTAIN EMPLOYMENT SOLUTIONS, INC.

Certificate of Status	0
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ver	6/4/2012 10:57:00 AM PAGE 2/002 Fax Server		
STATEM	MENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS		
statement of	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 <u>Utah</u>		
1. The name	e of the corporation: INTERMOUNTAIN EMPLOYMENT SOLUTIONS, INC.		
2. The princ	cipal office address: 450 E 1000 N, North Salt Lake, UT 84054		
3. The mail	ling address (if different):		
4. Date of i	incorporation/gualification: 11/12/2004 Document number: F04000006469		
	te and street address of the current registered agent and registered office on file with the Department of State:		
	C T Corporation System		
	1200 South Pine Island Road		
	Plantation FL 33324		
6. The nam (if chang	e and street address of the current registered agent and registered office on file with the Department of State: 1200 South Pine Island Road Plantation FL 33324 we and street address of the new registered agent (if changed) and /or registered office Corporation Service Company		
	Corporation Service Company		
	1201 Hays Street (P.O. Box NOT acceptable)		
	Tallahassee, FL 32301		
The street as changed	address of its registered office and the street address of the business office of its registered agent, I will be identical.		
Such changed	ge was authorized by resolution duly adopted by its board of directors or by an officer so by the board, or the corporation has been notified in writing of the change.		
lis	Elizabeth A. Dawson, Secretary		
	Signature of an officer or director) (Printed or typed mane and tille)		
I nereby ac I further ac of my dutte document i corporation Corpo	ccept the appointment as registered agent and agree to act in this capacity. gree to comply with the provisions of all statutes relative to the proper and complete performance es, and I am familiar with and accept the obligation of my position as registered agent. Or, if this is being filed merely to reflect a change in the registered office address, I hereby confirm that the on has been notified in writing of this change. oration Service Company		
By: 5	June 1, 2012		
If signing c	(Signative of Registered Agent) (Date)		
Sylvia Ou	ueppet, Assistant Vice President		
	(Typed or Printed Name)		
	(Typed or Printed Name) * * * FILING FEE: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)