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| (Requestor's Name) | | | | | |
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| (City/State/Zip/Phone #) | | | | | |
| PICK-UP | ☐ WAIT | MAIL | | | |
| | | | | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
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| Certified Copies | Certificates | s of Status | | | |
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| Special Instructions to Fi | ling Officer: | | | | |
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Office Use Only



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Ra Chang



VIA US MAIL

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Re: AEGIS COMMUNICATIONS GROUP, INC.

Dear Sir or Madam:

On behalf of the above-referenced corporation, enclosed please find the following for filing with the Florida Secretary of State:

- 1. One original (1) and one (1) copy of Change of Registered Agent/Address form;
- 2. \$35.00 to cover the required filing fee.

Please file immediately the enclosed, and return a file-stamped copy to the undersigned.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (512) 480-9131.

Respectfully,

REGISTERED AGENT SOLUTIONS, INC.

LEANA GUZMAN

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

| | | | 507.1508, or 617.1508, Flo d under the laws of the Sta | | |
|---|---|--|---|----------------------------|--|
| | | | d agent, or both, in the Stat | | |
| 1. The name of | the corporation: AEGI | S COMMUNIC | CATIONS GROUP | , INC. | |
| 2. The principa | l office address: 8201R | DGEPOINT DR | RIVE, IRVING TX 750 | 63 | |
| | | | | | |
| 3. The mailing | address (if different): | | | | |
| 4. Date of incom | rporation/qualification: | 07/27/2006 | Document number: | F06000004967 | |
| | d street address of the cur artment of State: (If resign | | at and registered office on f | ile with the | |
| | CORPORATION S | ERVICE COMP | PANY | out a | |
| | 1201 HAYS ST | | | | |
| | TALLAHASSEE FI | _ 32301 | | | |
| 6. The name an (if changed): | | • | f changed) and /or register | ed office PR F | |
| | REGISTERED AG | | NS, INC. | | |
| 155 Office Plaza Dr. Suite A P.O. Box NOT acceptable | | | | | |
| | Tallahassee, FL 32 | 2301 | | | |
| The street addr | ress of its registered offic I be identical. | e and the street add | dress of the business offic | e of its registered agent, | |
| Such change wanthorized by t | vas authorized by resolutine board, or the corporat | ion duly adopted by | y its board of directors or ed in writing of the chang | by an officer so | |
| Latus! | | | atrisha Norr | ris V.P. | |
| | • | istered agent and a isions of all statute d accept the obliga it a change in the r g of this change. | gree to act in this capacit s relative to the proper an tion of my position as reg egistered office address, I | | |
| J. | enature of Registered Agent | | November | 2,2010 | |
| If signing on b | ehalf of an entity: | | | | |
| | Escobedo, Asst. Sec | retary | | | |

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