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To:

Division of Corporations

Fax Number

: (850)617-6380

From: -

Account Name

: CORPORATION SERVICE COMPANY

Account Number : Phone :

120000000195 (850)521-1000

Fax Number

(850) 558-1575

Kimberry czaya

2009 FEB 18 AM 10: 51
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

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REGISTERED AGENT CHANGE

PC MALL SALES, INC.

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

Mong

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

| Pursuant to the provisions of sections 607.0502, 617.0502, 6 statement of change is submitted for a corporation organized in order to change its registered office or registered. | i under the laws of the State of |
|---|--|
| 1. The name of the corporation: PC MALL SALES, INC | <u> </u> |
| 2. The principal office address: 2555 West 190th Street | at, Suite 205, Torrance, CA 90504 |
| 3. The mailing address (if different): | |
| 4. Date of incorporation/qualification: 09/18/2008 | Document number: <u>F08000004084</u> |
| The name and street address of the current registered agent Florida Department of State: (If resigned, enter resigned) | and registered office on file with the |
| CT Corporation System | |
| 1200 South Pine Island Road | |
| Plantation, FL 33324 | |
| 6. The name and street address of the new registered agent (if changed): | changed) and /or registered office |
| Corporation Service Company | ARE FE |
| 1201 Hays Street (P.O. Box NOT socceptable) | SSEE, F |
| Tallahassee, FL 32301 | |
| The street address of its registered office and the street address changed will be identical. | ress of the business office of its registrating earn |
| Such change was authorized by resolution duly adopted by authorized by the board, of the corporation has been not free | |
| (Signature of an officer of queenty) | the Artix - Rules (Laws (Printed or typed transie and bile) |
| I hereby accept the appointment as registered agent and ag I further agree to comply with the provisions of all statutes of my duties, and I am familiar with and accept the obligate document is being filed merely to reflect a change in the res corporation has been notified in writing of this change. Comporation Service Company | ree to act in this capacity relative to the proper and complete performance on of my position as registered agent. Or, if this zistered office address, I hereby confirm that the |
| By Au Della Tarana | 2/12/09 |
| Assistant Vice President | |
| (1 Voted 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 (\$05)