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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I2000000195

: (850)521-1000

Phone Fax Number

: (850)558-1515

\*\*Enter the email address for this business entity to be used for suture annual report mailings. Enter only one order

Email Address:\_

DEBORAH.FOX@QINETIQ-NA.COM

## REGISTERED AGENT CHANGE ITS SERVICES, INC.

Certificate of Status	0
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4/15/2010

## 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 organize o chánge its registered office or registere	ed under the laws of the State of $\underline{Vi}$	rginia	
1. The name of the	corporation: ITS SERVICES, INC.			
2. The principal of				
3. The mailing add				
	ation/qualification: 07/02/2009		2700	
	reet address of the current registered age			
C	T Corporation System			
1	200 South Pine Island Road			
	lantation, FL 33324		201 TAI	
6. The name and st (if changed):	reet address of the new registered agent (	(if changed) and /or registered office	2018 APR 15 SECRETAR TALLAHASS	
<u>_</u>	Corporation Service Company		m≺	
1	201 Hays Street		AH 9: OF STE	
<u>-</u> 1	(P.O. Box NOT acceptable) allahassee, FL 32301		STE	
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.				
Such change was authorized by the	authorized by resolution duly adopted board, or the corporation has been notif	by its board of directors or by an of fied in writing of the change.	ficer so	
Slane	of an ornicar or phrecton)	Blanca Lozada, Attorney in Fac		
out boy attore twee to	e appointment as registered agent and comply with the provisions of all statute I am familiar with and accept the obliging the accept the obliging the merely to reflect a change in the seen notified in writing of this change.  Service Company	agree to act in this capacity es relative to the proper and compl ation of my position as registered a registered office address, I hereby o	ete performance gent. Or, if this confirm that the	
By: Myst	ture of Registered Agent)	04/09/2010 (Date)	<del></del>	
If signing on beha	- · ·	(Dillo)		
Elizabeth A. Da	wson, Asst. Vice President			
	ed or Printed Name)			

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