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REGISTERED AGENT CHANGE CANON BUSINESS SOLUTIONS - TERECK, INC.

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Corporate Filing Menu

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2/1/2011

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

	provisions of sections 607.0502, 617.050 ange is submitted for a corporation orgai		
in ord	ler to change its registered office or regist	tered agent, or both, in the State of Flo	orida.
1. The name of	the corporation: CANON BUSINESS	SOLUTIONS - TERECK, INC.	
2. The principal	l office address: One Canon Plaza, Lal	ce Success, NY 11042-1198	
			the state of the s
3. The mailing a	address (if different): c/o Seymour Liebma	n, One Canon Piaza, Lakes Success, NY	11042-1198
4. Date of incor	rporation/qualification: 05/24/2010	Document number: F1000000)2476
	d street address of the current registered a artment of State:	agent and registered office on file with	the
	C T Corporation System		
	1200 South Pine Island Road		
	Plantation, FL 33324 US		重要 三 一
6. The name an (if changed):	d street address of the new registered age	nt (if changed) and /or registered offic	FILE PH 3: 05 A FEB-1 PH 3: 05 ECRETARSEE, FLOR
	Corporation Service Company		SSERVE
•	1201 Hays Street		ES 3 (
	(P.O. Box NOT acceptable)	5 0
	Tallahassee, FL 32301		REAL S
The street address changed will	ess of its registered office and the street I be identical.	address of the business office of its	registered agent,
Such change wanthorized by t	as authorized by resolution duly adopte the board, or the corporation has been no	d by its board of directors or by an o otified in writing of the change.	dfficer so
5e1	ment Now	Blanca Lozada, Attorney In Fa	
	ture of an officer of director)	(Printed or typed hame and titl	•
I hereby accept I further agree of my duties, ar document is be corporation ha	t the appointment as registered agent ar to comply with the provisions of all stat nd I am familiar with and accept the ob ing filed merely to reflect a change in th is been notified in writing of this change ion Service Company	nd agree to act in this capacity, tutes relative to the proper and comp ligation of my position as registered he registered office address, I hereby	elete performance agent. Or, if this confirm that the
	ignstlye of Registered Agent)	01/31/2011	
	-	(Date)	
• •	ehalf of an entity:	•	
Sylvia Quepp			
Ţ.	Typed or Printed Name)	CD 845 00 4 4 4	

* * * 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)