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(Requestor's Name)				
(Address)				
(Ad	dress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
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SECRETARY OF STATE AND A JUNE 23 PH 3: 12

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T. CARTER



CSC - WILMINGTON Suite 400 2711 Centerville Road Wilmington De 19808 800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith jsmith2@cscinfo.com

Date: June 20, 2014

Order#: 174360-002

Re: EASYLINK SERVICES INTERNATIONAL CORPORATION

Enclosed please find:

Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.
XX Please return evidence to the following:

Attn: Janis M. Smith

c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	nge is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Statute organized under the laws of the State of DE egistered agent, or both, in the State of Florida		_
1. The name of t	he corporation: EASYLINK SERVIC	ES INTERNATIONAL CORPORATION		
2. The principal 6025 THE C	office address:ORNERS PARKWAY, NORCROSS	S GA 30092		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 05/27/2011	Document number: F1100000224	3	
	street address of the current registe tment of State: (If resigned, enter re-	red agent and registered office on file with the signed)	:	
	C T CORPORATION SYSTEM			
	1200 SOUTH PINE ISLAND ROAL)		
	PLANTATION	FL 33324		20 20 20 20 20 20 20
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			23 FH	
	Corporation Service Company		<u>ښ</u>	
	1201 Hays Street		12	(5/m
	P.O. Box Tallahassee	r NOT acceptable FL 32301		
		opted by its board of directors or by an office in notified in writing of the change.		ent,
		Dona Priebe, Vice President		_
I hereby accept I further agree to performance of agent. Or, if the hereby confirm	my duties, and I am familiar with a	statutes relative to the proper and complete and accept the obligation of my position as re reflect a change in the registered office add	gistered ress, I	
By: Dr	nature of Registered Agent	06/18/2014		_
	half of an entity:			
Grace E. Kirby,	Assistant Vice President			
Ty	ped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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