## F11000003672

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DEC 13 2012 T. LEWIS OIZ DEC 13 PM 3: 14



ACCOUNT NO. : 12000000195

REFERENCE: 449470 7912768

AUTHORIZATION :

COST LIMIT : \$ 35

ORDER DATE: December 7, 2012

ORDER TIME : 10:23 AM

ORDER NO. : 449470-002

CUSTOMER NO: 7912768

## CHANGE OF AGENT

NAME: TELVENT SERVICES INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Harry B. Davis

EXAMINER'S INITIALS:

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

statement of cha	provisions of sections 607.0502, 617.050 inge is submitted for a corporation organ r to change its registered office or regist	nized under the laws of the State of	Michigan
1. The name of t	the corporation: TELVENT SERVICE	ES INC.	
2. The principal	office address: 1390 Piccard Drive,	Suite 200, Rockville, MD 20	850
3. The mailing a	ddress (if different): 7000A Hollister Roa	ad, Attn: Tax Department, Houston	n, TX 77040
4. Date of incorp	poration/qualification: 09/13/2011	Document number: F1100	0003672
5. The name and	I street address of the current registered a treet of State: (If resigned, enter resigned		vith the
	NRAI Services, Inc.		_
	515 E. Park Avenue		70 ZO
,	Tallahassee, FL 32301 US		2012 DEC 13
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			
	Corporation Service Company		EF, FLORE
	1201 Hays Street		5 <b>F</b>
	P.O. Box NOT Tallahassee, FL 32301	acceptable	
	ess of its registered office and the street be identical.		
Such change wa authorized by th	is authorized by resolution duly adopted ne board, or the corporation has been no	l by its board of directors or by an tified in writing of the change.	officer so
		Maureen Cathell, Vice Pre	
I further agree is performance of agent. Or, if the hereby confirm	the appointment as registered agent and comply with the provisions of all state my duties, and I am familiar with and a is document is being filed merely to reflect that the corporation has been notified in Service Company	utes relative to the proper and con accept the obligation of my position ect a change in the registered offi	mplete n as registered ce address, I
By: S	nature of Registered Agent	12/06/2012	
If signing on be	half of an entity:	<del></del>	
Sylvia Quepp	pet, Asst. Vice President		
T	yped 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 \* \* \*