

F13000000351

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6380

RE-SUBMIT

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 205-8842
Fax Number : (850) 878-5368

Please retain original filing date of submission 5/6

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**REGISTERED AGENT CHANGE
FIRCOSOFT, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	034
Estimated Charge	\$35.00

RECEIVED
15 MAY -7 PM 2:20
REGISTRATION DIVISION
TALLAHASSEE, FLORIDA

FILED
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TALLAHASSEE, FLORIDA
15 MAY -6 AM 9:44

Electronic Filing Menu Corporate Filing Menu Help

205/8



May 7, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

FIRCOSOFT, INC.
FAX FILINGCT CORPORATION SYSTEM***
NEW YORK, NY 10003

SUBJECT: FIRCOSOFT, INC.
REF: F13000000351

RE-SUBMIT

Please retain original filing
date of submission 5/6

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

There is a comma between FIRCOSOFT and INC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina D Cannon
Regulatory Specialist II

FAX Aud. #: H15000110616
Letter Number: 015A00009556

RECEIVED
15 MAY -7 PM 2:20
REGULATORY SPECIALIST II
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Microsoft, Inc.
Name of Corporation

DOCUMENT NUMBER: F1300000351

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Renee Simonton
Name of Contact Person

Reed Elsevier
Firm/Company

1105 North Market Street, Suite 501
Address

Wilmington, DE 19801
City/State and Zip Code

reneesimonton@reedelsevier.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

reneesimonton at (302) 884-8311
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR2B045 (03/12)

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Fircosoft, Inc.
- 2. The principal office address: 8875 Hidden River Parkway,
Tampa, FL 33637
- 3. The mailing address (if different): c/o Reed Elsevier, 1105 North Market Street, Suite 501,
Wilmington, DE 19801
- 4. Date of incorporation/qualification: 1/24/2013 Document number: F13000000351
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Jade Associates Miami, Inc.
100 N Biscayne Blvd., Suite 500
Miami, FL 33132

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

C T Corporation System
c/o C T Corporation System, 1200 South Pine Island Road
P.O. Box NOT acceptable
Plantation, Florida 33324

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 resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Renee Simonton
Signature of an officer or director

Renee Simonton, Vice President
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

C T Corporation System
 By: Conie Buys
Signature of Registered Agent

5/6/2015
Date

If signing on behalf of an entity:

Typed 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 (03/12)

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 15 MAY - 6 AM 9:44