

F-1300000000882
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Division of Corporations
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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

2/ACHA
DEC 19 2013
R. WHITE

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

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
CHOICE SOLUTIONS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

RECEIVED
13 DEC 18 PM 3:03
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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13 DEC 18 PM 1:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Choice Solutions, Inc
Name of Corporation

DOCUMENT NUMBER: FI300000882

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:

Kathleen Rideout
Name of Contact Person
Houghton Mifflin Harcourt Publishing Company
Firm/Company
222 Berkeley Street
Address
Boston, MA 02116
City/State and Zip Code

kathy.rideout@hmc.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathy Rideout at 617 351-5115
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

CR2ED45 (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 Massachusetts _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Choice Solutions, Inc
2. The principal office address: 420 Lakeside Ave., Suite 401 Marlboro, MA 01752
3. The mailing address (if different): c/o Houghton Mifflin Harcourt, 222 Berkeley Street, Boston, MA 02116
4. Date of incorporation/qualification: 02/20/2013 Document number: F13000000882
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)

CORPORATION SERVICE COMPANY

1201 HAYS STREET

TALLAHASSEE, FL 32301-2525

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.

Kathleen A. Ridout
Signature of an officer or director

Kathleen Ridout, Assistant Secretary
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.

By: CT Corporation System
Signature of Registered Agent

12/17/13
Date

If signing on behalf of an entity:

Lisa Shreed, V.P.
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

CR2E043 (03/12)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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