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To:

Division of Corporations

Fax Number

: (850)617-6380

F'rom:

: CORPORATION SERVICE COMPANY Account Name

Account Number : 120000000195

Phone Fax Number

(850) 521-1000 : (850)558-1515

**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 TRAPEZE SOFTWARE GROUP, INC.

Certificate of Status	0
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Help

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

Pursuant to the provisions of sections 607.0502, 617.0502, statement of change is submitted for a corporation organiz in order to change its registered office or register.	red under the laws of the State of Dolaward	
I. The name of the corporation: TRAPEZE SOFTWAR	RE GROUP, INC.	
2. The principal office address: 8360 E. Via DeVentura	, Suite L-200, Scottsdale, AZ 85258	
The mailing address (if different):	1	
4. Date of incorporation/qualification: 06/01/1993	Document number: F93000002663	
5. The name and street address of the current registered age Florida Department of State:	ent and registered office on file with the	
CT Corporation System		
1200 South Pine Island Road		
Plantation, FL 33324	· · · · · · · · · · · · · · · · · · ·	
6. The name and street address of the new registered agent (if changed):	(if changed) and /or registered office	
Corporation Service Company		
1201 Hays Street	•	
(P.O. Box NOT acceptable)		
Tallahassee, FL 32301		
The street address of its registered office and the street as changed will be identical.	ddress of the business office of its registered agent,	
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been not		
Blanca of mil	Blanca Lozada, Attorney in Fact	
I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all statut of my duties, and I am familiar with and accept the oblig document is being filed merely to reflect a change in the corporation has been notified in writing of this change.		
Corporation Service Company By: 1000 C. T.	July 7, 2010	
(Signature of Registered Ageni)	(Date)	
If signing on behalf of an entity:		
Grace E. Kirby, Assistant VP (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, l'Allahassee, FL 32314 CR2E045 (8/05)