

(Requestor's Name)					
(Address)					
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(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Sasinoso Zinas) Namo)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



800248539238

06/13/13--01021--016 **35.00

JUN 17 2013

R. WHITE



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Vera M. Norris

Date: June 11, 2013

Order#: 681078-144

Re: SALLIE MAE, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

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: Vera M. Norris 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 ch	ange is submitted for a corporation or	0502, 607.1508, or 617.1508, Florida& ganized under the laws of the State of <u>[</u> gistered agent, or both, in the State of F	Delaware	
1 The name of	the corporation: SALLIE MAE, INC.			
2. The principa	office address: 2001 Edmund Halley	Drive, Reston, VA 20191		
3. The mailing	address (if different):			
4. Date of incor	rporation/qualification: 04/30/1997	Document number: F970000	02284	
	nd street address of the current registere artment of State: (If resigned, enter resigned)	ed agent and registered office on file wi gned)	th the	
	C T Corporation System			
	1200 South Pine Island Road			
	Plantation, FL 33324			
6. The name an (if changed):		gent (if changed) and /or registered off	ice TALE	
	Corporation Service Company		AFFIGURE SERVICE	7
	1201 Hays Street		13 SSEE	
	Tallahassee Fl 32301	NOT acceptable	四岁 至	
	ress of its registered office and the stre I be identical.	eet address of the business office of its		
Such change wanthorized by t	as authorized by resolution duly adop the board, or the corporation has been	nted by its board of directors or by an on notified in writing of the change.	officer so	
	Leb leeves	Deb Reeves, Vice President		
I hereby accept I further agree performance of agent. Or, if the hereby confirm	ure of an officer or director I the appointment as registered agent to comply with the provisions of all si f my duties, and I am familiar with an his document is being filed merely to r hat the corporation has been notifie on Service Company	Printed or typed name and title and agree to act in this capacity, tatutes relative to the proper and com, d accept the obligation of my position eflect a change in the registered office d in writing of this change.		
By: Ma	gnature of Registered Agent	June 6, 2013		
	ehalf of an entity:	Date		
Grace E. Kirby	•			
	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

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

statement of cha	ange is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida \mathfrak{L} organized under the laws of the State of \mathfrak{L} registered agent, or both, in the State of \mathfrak{L}	Delaware	
1. The name of	the corporation: SALLIE MAE, INC.			
		y Drive, Reston, VA 20191		
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 04/30/1997	Document number: F970000	002284	
	d street address of the current registertment of State: (If resigned, enter re	ered agent and registered office on file wiresigned)	ith the	
	C T Corporation System			
	1200 South Pine Island Road			
	Plantation, FL 33324		13 SEQ!	
6. The name and street address of the new registered (if changed):			JUN 13	FILED
	Corporation Service Company		OF S	0
		x NOT acceptable	9: 4 ORIE	
	P.O. Box Tallahassee, FL 32301	x NOT acceptable		
		//	•	
The street address changed will	ess of its registered office and the s be identical.	treet address of the business office of its	s registered agen	t,
Such change wa authorized by the		opted by its board of directors or by an on the change.	officer so	
	Leb lews	Deb Reeves, Vice President		
Signati	ure of an officer or director	Printed or typed name and titl	le	
I further agree performance of agent. Or, if th hereby confirm	the appointment as registered ages to comply with the provisions of all my duties, and I am familiar with a his document is being filed merely to that the corporation has been notif on Service Company	nt and agree to act in this capacity. I statutes relative to the proper and com and accept the obligation of my position o reflect a change in the registered offic fied in writing of this change.	aplete i as registered se address, I	
_	. L-Kubi,	June 6, 2013		
Sig	nature of Registered Agent	Date		
If signing on be	ehalf of an entity:			
Grace E. Kirby	, Assistant VP			
T	yped or Printed Name			

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