## -98000003046

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
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<del>_</del>		<del></del>		
(5	Samuel Providence & Lance			
(Business Entity Name)				
(Document Number)				
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Certified Copies	Certificates	of Status		
Special Instructions to F	iling Officer:			
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ACCOUNT NO. : 072100000032				
REFERENCE : 548870 4352981				
AUTHORIZATION Spelle Man				
COST LIMIT : \$35.00				
ORDER DATE: October 23, 2006				
ORDER TIME : 9:55 AM				
ORDER NO. : 548870-210				
CUSTOMER NO: 4352981				
CHANGE OF AGENT				
, ·				
NAME: WORKFLOW MANAGEMENT, INC.				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY				
AA PLAIN STAMPED COPY				
CONTACT PERSON: Amanda Haddan				
EXAMINER'S INITIALS:				

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

statement of cha	provisions of sections 607.0502, 617.0502, nge is submitted for a corporation organiz	ted under the laws of the State of $\underline{\Gamma}$	Delaware		
<del></del>	r to change its registered office or register	J. Company	orida.		
1. The name of t	he corporation: WORKFLOW MANAGEM	MENT, INC.			
2. The principal	office address: Three Greenwich Office Pa	rk, Greenwich, CT 06831			
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: May 29, 1998	Document number: F9800000	3046		
	street address of the current registered agoment of State:	ent and registered office on file with	ı the		
	Corporate Creations Network, Inc.				
	941 Fourth Street				
	Miami Beach, FL 33139		2006 O Secr		
Miami Beach, FL 33139  6. The name and street address of the new registered agent (if changed) and /or registered office SECRETARY OF SIGNATURE (if changed):  Corporation Service Company  1201 Hays Street					
	Corporation Service Company				
	1201 Hays Street		ATE RID		
	(P.O. Box NOT acceptable)				
	Tallahassee, FL 32301				
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 wa authorized by th	is authorized by resolution duly adopted the board, or the corporation has been not	by its board of directors or by an clified in writing of the change.	officer so		
Mar	weet ull	Maureen Cullen, Attorney In Fact			
	re of an officer or director)	(Printed or typed name and til	tie)		
I further agree to of my duties, an document is beil corporation has	the appointment as registered agent and to comply with the provisions of all status of am familiar with and accept the obliging filed merely to reflect a change in the been notified in writing of this change.  Service Company	agree to act in this capacity, tes relative to the proper and compation of my position as registered registered office address, I hereby	plete performance lagent. Or, if this y confirm that the		
~ _	^	October 18, 2006			
Ø	mature of Regisfered Agent)	(Date)			
If signing on be	half of an entity:				
Sylvia Queppet,	Assistant 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 CR2E045 (8/05)

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