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| (Re | questor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Name | e) |
| (Document Number) | | |
| Certified Copies | _ Certificates | of Status |
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*FILED 2012 AUG 20 AM II: 39

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CORPORATION SERVICE COMPANY ACCOUNT NO. : 12000000195

REFERENCE : 31,727-1

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE: August 20, 2012

ORDER TIME : 9:13 AM

ORDER NO. : 317271-004

46674A CUSTOMER NO:

CHANGE OF AGENT

NAME: CAMBER CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Carina L. Dunlap

EXAMINER'S INITIALS:

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: CAMBER CORPORATION OF ALABAMA |
| 2. The principal office address: |
| 635 Discovery Drive, Huntsville, AL 35806 |
| 3. The mailing address (if different): |
| 4. Date of incorporation/qualification: 03/03/1999 Document number: F99000001193 |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: |
| Ical Pichard Owens |
| Joel Richard Owens 12124 High Tech Avenue, Suite 290 Orlando, FL 32817 |
| Orlando, FL 32817 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| Corporation Service Company |
| 1201 Hays Street |
| (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 charge 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. |
| |
| (Signapare of an office or director) (Pfinted or typed name and title) |
| I bereby 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. |
| Corporation Service Company S-17-2uz |
| (Signatule of Registered Agent) (Date) |
| If signing on behalf of an entity: |
| Sylvia Queppet, Asst. 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, TALLAHASSEE, FL 32314 CR2E045 (8/05)