J37116

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

Office Use Only



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08 APR -9 PM 2: 19
SECRETARY OF STATE
TALLAHASSEF, FLORIE

C. Coulhette APR 0 9 200A



ACCOUNT NO. : 072100000032
REFERENCE : 521421 7275439
AUTHORIZATION: Spubble nan
COST LIMIT : \$35.00
ORDER DATE: April 9, 2008
ORDER TIME : 11:58 AM
ORDER NO. : 521421-130
CUSTOMER NO: 7275439
CHANGE OF AGENT
NAME: DECISIONHR I, INC.
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
CONTACT PERSON: Debbie Skipper EXT# 2948
EXAMINER:

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

statement of cha	provisions of sections 607.0502, 617.0502, 6 nge is submitted for a corporation organized to change its registered office or registered	d under the laws of the State of FLC	DRIDA		
1. The name of ti	ne corporation: DECISIONHR I, INC.				
2. The principal	office address: 12395 FIRST AMERICAN	WAY			
POWAY, CA	**************************************				
~		pt, c/o First Advantage	Corpo	ratio	on,
	lon Parkway, St. Petersburg,				
4. Date of incorp	oration/qualification: 10/06/1986	Document number:			
The name and Florida Depart	street address of the current registered agent ment of State:	t and registered office on file with the	ne .		
	PETER VANSON				
	1 PROGRESS PLAZA, SUITE 500	ſ	1	•	
	ST. PETERSBURG, FL 33701		SECR ALLA	08 A	ابدين
6. The name and (if changed):	street address of the new registered agent (if	f changed) and /or registered office	ETARY	APR-9	
	Corporation Service Company		EE.F	뫞	
	1201 Hays Street		101 113	2: 1	Te inte
	(P.O. Box NOT acceptable)	• •	E STE	9	
	Tallahassee, FL 32301		محنز		
The street addres as changed will l	s of its registered office and the street add be identical.	ress of the business office of its re	gistered a	agent,	
Such change was authorized by the	s authorized by resolution duly adopted by board, or the corporation has been notified	its board of directors or by an offed in writing of the change.	icer so		
Trul 1		RET T. JARDINE, ASST. SEC.			
` •	e of an officer or director)	(Printed or typed name and title)			
l jurther agree to of my duties, and document is bein corporation has	he appointment as registered agent and as comply with the provisions of all statutes I I am familiar with and accept the obligat g filed merely to reflect a change in the re been notified in writing of this change.	relative to the proper and comple ion of my position as registered ag gistered office address, I hereby o	te perfori zent. Or, onfirm th	mance if this at the	
By: Ollo	Service Company And All Sk Dev atture of Registered Agent)	H18/08	, 		
(Signing on beh		(var)			
DEBORAH D. SK	SIPPER ASST VP				
(Ту	ped 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)