

L08000080864

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H16000085471 3)))



H16000085471 3ARC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850) 617-6383

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 205-8842
Fax Number : (850) 878-5368

RECEIVED
TALLAHASSEE, FLORIDA

2016 APR -6 AM 11:32

FILED

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED

2016 APR -6 AM 10:44

RECEIVED
TALLAHASSEE, FLORIDA

**LLC REGISTERED AGENT CHANGE
MEDASSETS SERVICES LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

K. SALY
EXAMINER

APR -7

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Medassets Services I.L.C

2. (a) Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
100 NORTH POINT CENTER EAST, SUITE 200
ALPHARETTA, GA 30022

(b) Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

3. 8/25/2008 Date of filing/registration in Florida
4. L08000080864 Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Corporation Service Company

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
1201 Hays Street
Tallahassee, FL 32301-2525

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

C T Corporation System
NEW Registered Office Address:
1200 South Pine Island Road
Plantation, FL 33324

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Michael Jones
Printed or typed name of signer

I hereby 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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

By: CT Corporation System
Signature of Registered Agent

James M. Halpin
Assistant Secretary

FILED
2016 APR -6 AM 11:32
STATE OF FLORIDA
TALLAHASSEE, FLORIDA