

M03000002685

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

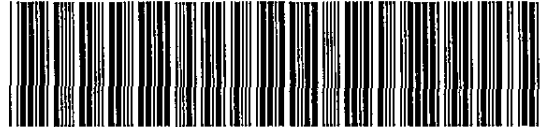
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500038876305

FILED
04 JUL 14 AM 8:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
04 JUL 14 PM 2:50
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
STATE OF FLORIDA

BR



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 795065 5048595
AUTHORIZATION : *Patricia Pigute*
COST LIMIT : \$ 25.00

FILED
04 JUL 14 AM 8:31
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

ORDER DATE : July 8, 2004

ORDER TIME : 1:04 PM

ORDER NO. : 795065-485

CUSTOMER NO: 5048595

CUSTOMER: Ms. Deborah L. McMennamy
Affiliated Computer Services,
2828 N Haskell

Dallas, TX 75204

CHANGE OF AGENT

NAME: ACS DEFENSE, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limited liability company is: ACS DEFENSE, LLC
2. The mailing address of the limited liability company is : _____
Five Burlington Woods, Suite 100, Burlington, MA 01803
- 08/13/2003 M03000002685
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

C T Corporation System
Name
1200 South Pine Island Road
Address
Plantation, FL 33324
City, State and Zip

6. The name and address of the new registered agent and/or office:

Corporation Service Company
Name
1201 Hays Street
Florida street address (P.O. Box **NOT** acceptable)
Tallahassee FL 32301
City, State and Zip

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.

Maureen Cullen
(Signature of a member or authorized representative of a member)

Maureen Cullen, Attorney in Fact
(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 608, 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.

Sylvia Queppet
(Signature of Registered Agent) Sylvia Queppet, Asst. Vice President

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314