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EXAMINER



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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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ORATION SERVICE COMPANY.

ACCOUNT NO. : 12000000195

REFERENCE: 801277 7441928

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : June 3, 2011

ORDER TIME : 9:25 AM

ORDER NO. : 801277-059

CUSTOMER NO: 7441928

CHANGE OF AGENT

NAME:

SHARED TECHNOLOGIES MANAGED

SERVICES, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX _ PLAIN STAMPED COPY

CONTACT PERSON: Jeanine Reynolds

EXAMINER'S INITIALS:

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. Name of the limited liability company: SHARED TEC	HNOLOGIES MANAGED SERVICES, L.C.
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	: <u>2425 Gateway Dr.</u> Irving TX 75063
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
11/27/2006	M0600006521
3. Date of filing/registration in Florida	Document number
5. (a) Registered Agent and Registered Office shown on the	he records of the Florida Dept. of State:
Registered Agent:	CT Corporation System
Registered Office Address:	1200 South Pine Island Road Plantation FL 33324
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> NEW Registered Agent:	V Registered Office address: Corporation Service Company
NEW Registered Office Address:	1201 Hays Street
(MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL 32301
If the limited liability company is not organized under the lathat after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the ca hereby confirmed that the change(s) was/were authorized by liability/company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member)	address of the registered office and the business se of a Florida limited liability company, it is an affirmative vote of the members of the limited
(Printed or typed name of signee)	
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the pro- am familiar with and accept the obligations of my position of F.S. Or, if this document is being filed to merely reflect a cl confirm that the limited liability company has been notified Corporation Service Company	ree to act in this capacity. I further agree to ber and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.
(Signature of Registered Agent) Sylvia Queppet, Asst. VP	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00