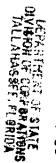
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(Requestor's Name)
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DEC - 6 2010

EXAMINER

DIVISION OF CORPORATIONS

10 DEC -3 AN 8: 91.



CORPORATION SERVICE COMPANY: ACCOUNT NO. : I2000000195

REFERENCE: 575912 4385593

AUTHORIZATION

COST LIMIT

ORDER DATE: November 12, 2010

ORDER TIME : 1:51 PM

ORDER NO. : 575912-011

CUSTOMER NO: 4385593

CHANGE OF AGENT

NAME: HEWITT ASSOCIATES LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Doreen Wallace

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.

	me of the limited liability company: HEWITT ASSOC	CIATES L.L.C.	
2. (a	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y: 100 Half Day Road Lincolnshire, IL 60069	ON TO
(b	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Lincolnshire, IL 60069 100 Half Day Road Attn: Ann Eckstein Lincolnshire, IL 60069	_
01/29	/1996	M96000000035	F. C
3. Da	te of filing/registration in Florida	4. Document number	
5. (a	Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
	Registered Agent:	C T 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>NE</u> <u>NEW Registered Agent</u> :	W Registered Office address: Corporation Service Company	
NEW Registered Office Address:	1201 Have Street		
		1201 Hays Street	
	(MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL 32301	
that a office hereb liabili limite		Tallahassee ,FL 32301 laws of the State of Florida, it is hereby confirment address of the registered office and the business are of a Florida limited liability company it is	S

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