FILED 2002 UNIFORM BUSINESS REPORT (UBR) May 27, 2002 8:00 am Secretary of State DOCUMENT # P08886 1. Entity Name 05-27-2002 90471 014 ***150.00 ADP FINANCIAL INFORMATION SERVICES, INC. Mailing Address Principal Place of Business ONE ADP BLVD. ONE ADP BLVD. MS 433 ROSELAND NJ 07068 ROSELAND NJ 07068 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 22-2640844 Not Applicable \$8.75 Additional Zio Country Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition ☐ Delete TITLE ☐ Change TITLE PSD NAME BENSON, JAMES B NAME STREET ADDRESS ONE ADP BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **ROSELAND NJ 07068** VED Addition ☐ Change TITLE TITLE X Delete VCD KAREN E. DYKSTRA NAME NAME HAVILAND, RICHARD J LOP BEUD. STREET ADDRESS STREET ADDRESS ONE ADP BLVD. CITY-ST-ZIP CITY-ST-ZIP **ROSELAND NJ 07068** Change ☐ Addition ☐ Delete TITLE TITLE ASD NAME NAME SINGER, ROBERT J. STREET ADDRESS STREET ADDRESS ONE ADP BLVD. CITY-ST-ZIE CITY-ST-ZIP ROSELAND NJ 07068 ☐ Change Addition Delete TITI F NAME NAME COLOTTI, RAYMOND L STREET ADDRESS STREET ADDRESS ONE ADP BLVD CITY-ST-ZIP CITY-ST-ZIP **ROSELAND NJ 07068** Addition ☐ Delete TITLE TITLE THOMAS DELORENZO NAME NAME STREET ADDRESS ONE ADP BLUD STREET ADDRESS POSELAND NJ 07068 CITY-ST-ZIP CITY-ST-ZIE Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

an addre

SIGNATURE:

s, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT J. SINGER

04/24/02

973 974-5525

Daytime Phone #