P17193

(Requestor's Name)				
(A	ddress)			
Coddran				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
	usiness Entity Name)			
ay	usiness Endry Name;			
(Document Number)				
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SECRETARY OF STATE FALLAHASSEE, FLORIDA

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January 29, 2004

To Whom It May Concern:

Please file the enclosed change of agent form and return a date stamped copy to my attention. I have enclosed a self address envelope for your convenience.

Should you have any questions, please do not hesitate to contact me. The number I can be reached at is $1-800-235-0337 \times 123$.

Sincerely,

Carmen Díxon

Corporate Services Manager

TRANSMITTAL LETTER

Division of Corporations				
SUBJECT: FINANCIALWARE / TAMPA, INC. (Name of corporation)				
DOCUMENT NUMBER: P17193				
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Travis Pinkstaff				
(Name of person)				
NSI (Name of firm/company)				
(wante of introcompany)				
145 Baker Street				
(Address)				
Marion, OH 43302				
(City/state and zip code)				
For further information concerning this matter, please call:				
Travis Pinkstaff at (740) 387 6806 ext. 113 (Name of person) (Area code & daytime telephone number)				
(Name of person) (Area code & daytime telephone number)				
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399				

CR2E045(09/03)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the p	provisions of sections 607.0502, 617.0502, 607.15	08, or 617.1508, Florida Statutes, this s	tatement of
change is submit	tted for a corporation organized under the laws of	the State of Indiana	in order
to change its reg	ristered office or registered agent, or both, in the S	tate of Florida.	
1. The name of t	the corporation: FINANCIALWARE / TAMPA,	INC.	•
2. The principal	office address: 12800 N. MERIDIAN STREET	□SUITE 150□CARMEL IN 36032	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 12/14/1987 Doc	cument number: P17193	
	I street address of the current registered agent and timent of State:	registered office on file with the	
	CT CORPORATION SYSTEM	<u></u>	£ 2
	1200 S. PINE ISLAND ROAD		
	PLANTATION FL 33324	<u> </u>	题 三四
6. The name and (if changed):	street address of the new registered agent (if chan	ged) and /or registered office	FILED SE
	NRAI Services, Inc.		Dr.
	526 E. Park Avenue		
	(P.O. Box or personal mailbox NOT	acceptable)	
	Tallahassee, FL 32301		
The street addre	ess of its registered office and the street address of identical.	of the business office of its registered	agent, as
Such change wa	is authorized by resolution duly adopted by its be- corporation has been notified in writing of the	oard of directors or by an officer so au change.	thorized by
	ignature of an officer or director)	Charles of Myers	. President
I hereby accept i I further agree to dutics, and I am being filed mere been notified in	the appointment as registered agent and agree to comply with the provisions of all statutes relations of all statutes relations of all statutes relations of my poly to reflect a change in the registered office adwiniting of this change.	o act in this capacity. ive to the proper and complete perform osition as registered agent. Or, if this dress, I hereby confirm that the corpor	nance of my document is ation has
NRAI Services,	-	12/23/03	
	(Signature of Registered Agent)	(Date)	
If signing on bel	half of an entity:		
Travis Pinksta		Assistant Secretary	
	(Typed or Printed Name)	(Capacity)	

* * * FILING FEE: \$35.00 * * *