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Electronic Filing Cover Sheet

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(((H140001802133)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023 Phone : (850)222-1092 : (850)878-5368 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

REGISTERED AGENT CHANGE STREAM INTERNATIONAL INC.

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JUL 31 2014

Electronic Filing Menu

Corporate Filing Menu

HelpXANINGER

COVER LETTER

то:	Amendment Section Division of Corporations	
SUBJ	Stream International Inc.	
3003	Name of C	orporation
DOC	P26642 UMENT NUMBER:	
The er	nclosed Statement of Change of Registered Offic	e/Agent and fee are submitted for filing
	return all correspondence concerning this matte	•
1 10430	result an correspondence concerning and mane	to the tonowing.
	Name of Co	ntact Person
	Firm/C	Ompany
	7 1111/200	лирин у П
	Add	ress
	City/State as	nd Zip Code
	F-mail address: (to be used for f	uture annual report notification)
	L-man address. (to be used for t	uture amitiai report notification)
For fu	orther information concerning this matter, please	call:
	-	
	Name of Contact Person	at () Area Code & Daytime Telephone Number
	Ivalite of Contact Gisoti	Area Code & Daytine Telephone Number
Enclo	sed is a \$35.00 check made payable to the Depar	tment of State.
	Mailing Address	Street Address
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (03/12)

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

		102, 607.1508, or 617.1508, Florida Statutes, this mized under the laws of the State of Delaware	,	
		stered agent, or both, in the State of Florida.	—	
		_		
1. The name of	the corporation: Stream International Inc.	SUPER AND WELL BOLEV MAN ANARY		
2. The principa	l office address: 20 WILLIAM STREET S	SUITE STO WELLESLEY, MA 02481		
				
3. The mailing	address (if different):			
4. Date of incom	rporation/qualification: 10/24/1989	Document number: P26642		
	d street address of the current registered artment of State: (If resigned, enter resign	agent and registered office on file with the ned)		
	CORPORATION SERVICE COMPANY	<u> </u>		
	1201 HAYS STREET			
	TALLAHASSEE, FL 32301			<u>نز</u>
6. The name ar (if changed).		ent (if changed) and /or registered office	14, 1111, 30	
	C T Corporation System			92() - 20c
	c/o C T Corporation System, 1200 South	Pine Island Road	=	<u> </u>
P.O. Bax NOT acceptable				걸
	Plantation, Florida 33324		8։	
The street add as changed wi	ress of its registered office and the stree Il be identical.	et address of the business office of its registered	agent,	
Such change vauthorized by	vas authorized by resolution duly adopte the board, or the corporation has been n	ed by its board of directors or by an officer so notified in writing of the change.		
KIN	XEDAPIL	Kristin Bolden, Vice President		
Signa	hare of an officer or director	Printed or typed name and title		
I hereby accept further agree performance a agent. Or, if thereby confift	n the appointment as registered agent a to comply with the provisions of all sta f my duties, and I am familiar with and his document is being filed merely to re n that the corporation has been notified	ind agree to act in this capacity, atutes relative to the proper and complete accept the obligation of my position as register flect a change in the registered office address, I I in writing of this change.	ed	
Ву:	a maillour?	7/29/14		
	gnature of Reguldred Agent	Date		
If signing on b	ehalf of an entity:			
	s, Assistant Secretary			
C T Corporation	Typed or Printed Name on System * * * FILLING F	EE: \$35.00 * * *		
	FILING P	ETT. 323100		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)