Division of Corporations

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Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Fnone : (850)222-1092 Fax Number : (850)878-8259

REGISTERED AGENT CHANGE

AI INSIGHT, INC.

Certificate of Status	0
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Corporate Filing Menu

Help

2/3/2009

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

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this name is submitted for a corporation organized under the laws of the State of Florida let to change its registered office or registered agent, or both, in the State of Florida.	
	f the corporation: At Insight, Inc.	
	of office address: 4901 Vineland Road, Suite 450, Orlando, Florida 32811	
3. The mailing	address (if different):	
4. Date of incor	rporation/qualification: 09/21/1992 Document number: V65830	
	nd street address of the current registered agent and registered office on file with the artment of State:	
	Steve Epstein PS	•
	4901 Vineland Road, Suite 450	1
	Orlando, FL 32811	၁ 🎚
6. The name an (if changed):	nd street address of the new registered agent (if changed) and for registered office	PM .
	C T Corporation System 2元	ယ L
	c/o C T Corporation System, 1200 South Pine Island Road	
	(P.O. Box NOT acceptable)	
	Plantation, Florida 33324	
	ress of its registered office and the street address of the business office of its registered agent, Il be identical.	
Such change wanthorized by	vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
- Ke	Renea Simonton Vice President (Printed or types name and title)	
	thir of an officer of director) of the appointment as registered agent and agree to act in this capacity, to complete performance to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this eing filed merely to reflect a change in the registered office address, I hereby confirm that the as been notified in writing of this change.	: :
By: Kattung	CT Corporation System A William 3 2009 Signature of Registered Agent)	
If signing on b	pehalf of an entity:	
· · · · · · · · · · · · · · · · · · ·	ddoes, Assistant Swiretary (Typed or Printed Name)	
!	* * * FILING FEE: \$35,00 * * *	
N	MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314	

FL196 - 09/14/2005 C T System Online

CR2E045 (8/05)