APR-13-20:0 P.01 Page 1 of 1 Division of Corporat rida Department of State **Division of Corporations Electronic Filing Cover Sheet** Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Email Address:darcy.gehrke@informatixinc.com

REGISTERED AGENT CHANGE INFORMATIX, INC.

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of <u>California</u> in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: INFORMATIX, INC.

2. The principal office address: 1740 Creekside Oaks Drive Ste. 175, Sacramento, California 95833

3. The mailing address (if different):____

4. Date of incorporation/qualification: 8/14/2006

F06000005317

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (if resigned, enter resigned)

NATIONAL CORPORATE RESEARCH, LTD., INC.

515 EAST PARK AVENUE

TALLAHASSEE FL 32301

The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Business Filings Incorporated

1203 Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-296

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Signature of an othoge of director

Printed or typed name and talk

I hereby accept the appointment as registered agant and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

N and

ignature of Registered Agent

28th day of March, 2011

Date

If signing on behalf of an entity:

Mark Williams, AVP

Typed or Printed Neme

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (\$405)

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