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Division of Corporations

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REGISTERED AGENT CHANGE DATA SYSTEMS ANALYSTS, INC.

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

ursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this attement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.	
The name of the corporation: DATA SYSTEMS ANALYSTS, INC.	_
The principal office address:	
8 Neshaminy Intreplex, Suite 209, Trevose, PA 19053	-
The mailing address (if different):	-
Date of incorporation/qualification: 11/04/2008 Document number: F08000004777	-
The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
C T Corporation System	
1200 South Pine Island Road	
Plantation, FL 33324	
The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Corporation Service Company	ورزا
1201 Hays Street	ř
1201 Hays Street (P.O. Box NOT acceptable)	
Tallahassee FL 32301 — 6	
e street address of its registered office and the street address of the business office of its registered agents	ייי חבר ת
ch change was authorized by resolution duly adopted by its board of directors or by an officer so thorized by the board, or the corporation has been notified in writing of the change.	
Diffiniture of an efficer or director) (Printed or typed name and little)	
ereby accept the appointment as registered agent and agree to act in this capacity, or their agree to comply with the provisions of all statutes relative to the proper and complete performance my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this cument is being filed merely to reflect a change in the registered office address, I hereby confirm that the reporation has been notified in writing of this change. Comporation Service Company	
y: Loce of Registered Agent) (Date)	
signing on behalf of an entity:	
(Typed or Printed Name)	

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
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