F12000000533

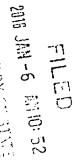
(Requ	estor's Name)			
(Addre	ess)			
(Addre	ess)			
(City/S	State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Busin	ess Entity Name	e)		
(Document Number)				
Certified Copies	Certificates of	of Status		
Special Instructions to Fili	ng Officer:			

Office Use Only



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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: January 4, 2016

Order#: 936722-002

Re: ICIMS, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$50 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Janis M. Smith c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	ange is submitted for a corporation	617.0502, 607.1508, or 617.1508, Fi n organized under the laws of the St r registered agent, or both, in the St	ate of NJ	
		r registered agent, or bong in the on	are of 1 to have	
1. The name of	the corporation: ICIMS, INC.	Floor Metawan NI 07747		
2. The principal	l office address: Parkway 120: 5th	Floor, Matawan, NJ 07747		
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 02/01/201	2 Document number: _F	12000000533	2316
	d street address of the current regi artment of State: (If resigned, enter	stered agent and registered office on resigned)	file with the	三二
	CT Corporation System			o m
	1200 South Pine Island			型の
	Plantation	FL 33324		ب پر
(if changed):	Corporation Service Company 1201 Hays Street	<u> </u>		
		Box NOT acceptable		
	Tallahassee	FL 32301		
		e street address of the business offic		t,
Such change wanthorized by t	as authorized by resolution duly a he board, or the corporation has b	adopted by its board of directors or been notified in writing of the chan	by an officer so ge.	
	2/2	Michael Greten	VP	
_	ure of an office of director	Printed or typed nam		
I hereby accept I further agree performance of agent. Or, if th hereby confirm Corporatio	t the appoinment as registered a to comply with the provisions of f my duties, and I am familiar wit uis document is being filed merely I that the corporation has been no on Service Company	gent and agree to act in this capaci all statutes relative to the proper a h and accept the obligation of my p to reflect a change in the register otified in writing of this change.	ry, nd complete position as registered ed office address, I	
By: Y) no c	o tokubi.	12/30/2015		
	gnature of Registered Agent chalf of an entity:	Date		
	, Assistant Vice President			
	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 CR2ED45 (03/12)