## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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## REGISTERED AGENT CHANGE GTECH CORPORATION

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**EXAMINER** 

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

statement of cha	inge is submitted for a corporation organi	2, 607.1508, or 617.1508, Florida Statutes, this ized under the laws of the State of Delaware red agent, or both, in the State of Florida.		
1. The name of	the corporation: GTECH CORPORAT	TON		
2. The principal	office address: 10 Memorial Blvd, Pro	ovidence, RI 02903		<del></del>
3. The mailing a	ddress (if different):			<del></del>
4. Date of incorp	poration/qualification: 09/09/1985	Document number: P07334		
	i street address of the current registered ag tment of State:	rent and registered office on file with the		
•	CT Corporation System			
	1200 S. Pine Island Road			=
	Plantation FL 33324		3S 0	SION
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		10 SEP 20 /	IVISION OF CORP	
	Corporation Service Company		AH	왕
	1201 Hays Street		<del>-</del>	STA ORAI
	(P.O. Box NOT accoptable)	· · · · · · · · · · · · · · · · · · ·	•	<u> </u>
	Tallahassee, FL 32301			35
as changed will	be identical.	address of the business office of its registered a	gent,	
Such change was authorized by the	is authorized by resolution duly adopted the board, or the perporation has been not	by its board of directors or by an officer so inted in writing of the change.		
Bla	Ma Landon	Blanca Lozada, Attorney in Fact		
	to or an ornical populocity	(Printed of typed hame ned title)		
I hereby accept I further agree to of my duties, on document is bei corporation has	the appointment assegistered agent and o comply with the provisions of all statu d I am familiar with and accept the obli- ng filed merely to reflect a change in the been notified in writing of this change.	l agree to act in this capacity. ues relative to the proper and complete perform gation of my position as registered agent. Or, registered office address, I hereby confirm the	nance if this it the	
	on Service Company	09/15/2010		
By: Su (Si	matuje of Registered Agency	(Date)		
If signing on be	half of an entity:			
Sylvia Queppo	ct, Asst. VP ypod or Printed Name)			
(1	* * * FILING FE	R: \$35.06 * * *		

Make Checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
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