No. <b>C 135891</b>		Due	2. Registered Agent and Address (NO PO BOX)				
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form  1. Mailing Address: Correct in this box if needed.  CAPGEMINI AMERICA, INC. DALE GARRON 400 BROADACRES AVE SUITE 410 BLOOMFIELD NJ 07003-3156		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713  3. New Registered Agent Signature:*			
4. Corporations: Enter Names	and Busin	ess Addresses of Pre	esident, Secretary, and Directors. Treasure	r (optional).			
Office Held Na	me		Street or PO Address	City	State	Country	Postal Code
TREASURER RIC PRESIDENT TIME	REASURER RICHARD PLESSNER RESIDENT TIM BRIDGES		623 FIFTH AVENUE 33RD FLOOR 400 BROADACRES DRIVE SUITE 410 623 FIFTH AVENUE 33RD FLOOR 623 FIFTH AVENUE 33RD FLOOR	NEW YORK  BLOOMFIELD  NEW YORK  NEW YORK	NY NJ NY NY	USA USA USA USA	10022 07003-3156 10022-3156 10022
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
NJ C 135891		Signature: Robe	Date: 11/21/2016				
		Name (type or p	Title: Tax Officer				
Processed 11/21/2016		* Electronically provided signatures are accepted as original signatures.					