F110000004441

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MAR 2 1 2018

T. LEMIZUK



CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195 REFERENCE : 122511 7391888 AUTHORIZATION : COST LIMIT : ORDER DATE: March 19, 2018 ORDER TIME : 9:26 AM ORDER NO. : 122511-050 CUSTOMER NO: 7391888 CHANGE OF AGENT NAME: CREDIT CORP SOLUTIONS INC. PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY
XX PLAIN STAMPED COPY CONTACT PERSON: Roxanne Turner EXAMINER'S INITIALS:

COVER LETTER

то:	Amendment Section Division of Corporations
SUBJE	Credit Corp Solutions Inc.
SOBJE	Name of Corporation
DOCU	F11000004441 MENT NUMBER:
	losed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please re	eturn all correspondence concerning this matter to the following:
	Alison Tang
	Name of Contact Person
	Credit Corp Solutions Inc.
	Firm/Company
	180 West Election Road, Suite 200
	Address
	Draper , UT, 84020
	City/State and Zip Code
	ATang@creditcorp.com.au
	E-mail address: (to be used for future annual report notification)
For furth	er information concerning this matter, please call:
Afison T	ang 855 392-2793
	Name of Contact Person at () Area Code & Daytime Telephone Number
Enclosed	is a \$35.00 check made payable to the Department of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

statement of cha	nge is submitted for a c	607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this corporation organized under the laws of the State of Delawate and office or registered agent, or both, in the State of Florida.		
1. The name of t	he corporation: Credit (Corp Solutions Inc.		
2. The principal office address: 180 West Election Road, Suite 200 Draper , UT, 84020				
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification:	07/07/2011 Document number: F11000004441		
	street address of the cu	nrent registered agent and registered office on file with the ned, enter resigned)		
	NRAI SERVICES, INC			
	1200 South Pine Islan	d Road Plantation, FL 33324		
6. The name and (if changed):		ew registered agent (if changed) and /or registered office		
	Corporation Service C	Company 28		
	1201 Hays Street	DO D. MAY		
	Tallahassee	P.O. Box NOT acceptable FL 32301		
as changed will	be identical.	ce and the street address of the business office of its registered agent,		
authorized by the	s authorized by resolut e board, or the corpora	ion duly adopted by its board of directors or by an officer so tion has been notified in writing of the change.		
X	WWW	MICHAEL EADIE , DIRECTOR, TREASURER, UP		
t I hereby accept t I further agree to performance of t agent. Or, if this hereby confirm t	o comply with the prov ny duties, and I am fan s document is beiny fild	Printed or typed name and intensional intensions of all statutes relative to the proper and complete issions of all statutes relative to the proper and complete niliar with and accept the obligation of my position as registered and merely to reflect a change in the registered office address, I sheen notified in writing of this change.		
By: CLY	mue de	unu 3/20/2018		
Sagning on beh	alf of an entity:	Roxanne Turner Asst. Vice President		
Ту	ned or Printed Name			

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

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