FIRMOSAOYY

(Re	equestor's Name)				
(Address)					
(Ac	ldress)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nan	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
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Office Use Only



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04/28/14--01034--008 **35.00

SECRETARY OF STATE





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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Morgan Kennedy

Date: April 24, 2014

Order#: 097301-009

Re: MERCHANTS CREDIT ADJUSTERS, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

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: Morgan Kennedy

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 ch	provisions of sections 607.0502, 617.0 ange is submitted for a corporation org ar to change its registered office or reg	ganized under the la	aws of the State of NE	BRASKA	-
1. The name of	the corporation: MERCHANTS CRED	IT ADJUSTERS, IN	VC		
2. The principal	office address: 4005 South 148th Stre	eet			
	OMAHA, NE 68137				
3. The mailing a	address (if different):				
4. Date of incorporation/qualification: 05/14/2012 Document number: F12000002044			044		
	d street address of the current registere rtment of State: (If resigned, enter resigned)		red office on file with t	he	
	C T CORPORATION SYSTEM				
	1200 SOUTH PINE ISLAND ROAD				,
	PLANTATION	FL.	33324	#	
6. The name and (if changed):	I street address of the new registered a	gent (if changed) ar	nd /or registered office	APR 28	
	Corporation Service Company			PH	
	1201 Hays Street			PH 11: 4	3.7
	P.O. Box N	OT acceptable FL	32301	-	All Property
The street address changed will	ess of its registered office and the strebe identical.			gistered ager	nt,
	as authorized by resolution duly adopt the board, or the corporation has been in				
-LL	26		RIEBE, VICE PRESIDE	ENT	
I hereby accept I further agree i performance of agent. Or, if the hereby confirm	te of an officer or director the appointment as registered agent of comply with the provisions of all standard with and I am familiar with and is document is being filed merely to rethat the corporation has been notified nearly in Service Company	and agree to act in atutes relative to th I accept the obligate effect a change in t	ne proper and complet tion of my position as t he registered office an	registered	
By: All	in lue par	04/16/2014			
	nature of Registered Agent		Date		
If signing on bel	half of an entity:				
	PET, ASSISTANT VICE PRESIDENT				
Ty	ped or Printed Name				

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

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