FB000001231

. (i	Requestor's Name)			
(Address)				
(/	Address)			
(6	City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(1	Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
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2016 FEB 17 AM 8: 25

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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: February 15, 2016

Order#: 980313-003

Re: MASSACHUSETTS HIGHER EDUCATION ASSISTANCE CORPORATION

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35 .

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 ch	ange is submitted for a corporati	, 617.0502, 607.1508, or 617.1508, Flow ion organized under the laws of the State or registered agent, or both, in the State	e of Massachusetts
1. The name of	the corporation: MASSACHUSE	TTS HIGHER EDUCATION ASSISTA	NCE CORPORATION
	l office address:dge Street, Boston, MA 02114		
3. The mailing	address (if different):		
4. Date of incor	poration/qualification: 03/19/20	Document number: F13	000001231
	d street address of the current reg rtment of State: (If resigned, ente	gistered agent and registered office on fi er resigned)	le with the
	CT CORPORATION SYSTEM		
	1200 S PINE ISLAND RD		
	PLANTATION	FL 33324	
6. The name and (if changed):	d street address of the new regist	ered agent (if changed) and /or registere	ed office
	Corporation Service Company		
	1201 Hays Street		
). Box NOT acceptable	_
	Tallahassee	FL 32301	
The street addreas changed will	ess of its registered office and the be identical.	ne street address of the business office	of its registered agent,
Such change wa authorized by th	as authorized by resolution duly he board, or the corporation has	adopted by its board of directors or by been notified in writing of the change.	an officer so
	T26 2	Dona Priebe	Vice President
Sidnat	ke of an officer or director	Printed or typed name a	nd title
i juriner agree performance of ageni. Or, if ih hereby confirm	to comply with the provisions of my duties, and I am familiar wi is document is being filed merel	agent and agree to act in this capacity. If all statutes relative to the proper and ith and accept the obligation of my posly to reflect a change in the registered to tified in writing of this change.	ition as registered
Ву:	Inc. Cokubia	02/08/2016	
Sig	nature of Registered Agent	Date	
lf signing on be	half of an entity:		
Grace E. Kirby,	, Asst. Vice President		
T	yped or Printed Name	_	

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