## F14000003656

•				
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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11/20/17--01030--002 \*\*35.00

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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Mary Rivers mary.rivers@cscglobal.com

Date: November 17, 2017

Order#: 906265-062

Re: NEXTEP BUSINESS SOLUTIONS IV, 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: Mary Rivers

c/o Corporation Service Company

251 Little Falls Drive 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 cha	ange is submitted for a corp	.0502, 617.0502, 607.1508, or 617.1508, Florida poration organized under the laws of the State o office or registered agent, or both, in the State of	<u>TEXAS</u>	·····
1. The name of	the corporation: NEXTEP (	BUSINESS SOLUTIONS IV. INC.		
2. The principal				
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 08/	29/2014 Document number: F1400	0003686	
	d street address of the curre etiment of State: (If resigned	ent registered agent and registered office on file d, enter resigned)	with the	
	CAPITOL CORPORATE	SERVICES, INC.	_	
	515 EAST PARK AVENL	JE, 2ND FL		
	TALLAHASSEE	FL 32301	- - -	
6. The name and (if changed):		registered agent (if changed) and /or registered (		Will NUA 50
	Corporation Service Com	прапу	_	AHRO
	1201 Hays Street			**************************************
	Tallahassas	P.O. Box NOT acceptable	-	
	Tallahassee	FL 32301	_	
The street address changed will	ess of its registered office be identical.	and the street address of the business office of	its registered a	igent,
Such change wa authorized by th	as authorized by resolutior he board, or the corporatio	n duly adopted by its board of directors or by ar in has been notified in writing of the change.	officer so	
- Lie C	P. agni	Jill Cilmi	Vice Presid	dent
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as regist to comply with the provision of	ered agent and agree to act in this capacity, ons of all statutes relative to the proper and co iar with and accept the obligation of my position merely to reflect a change in the registered officen notified in writing of this change.		d
By: X \mathred{N}_N	mature of Registered Agent	11/13/2017 Date		
	chalf of an entity:			
Grace E. Kirby,	, Assistant Vice President			
T	voed or Printed Name	<del></del>		

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